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| Fill in this information to identify your case:                         |   |
|---|---|
| United States Bankruptcy Court for the:  Northern District of: Illinois |   |
| (State)  Case number (if known)   | Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13 |

#### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | art 1: Identify Yourself  |                            |   |
|----|---|----------------------------|---|
|    |   | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name  | Kenneth                    |   |
|    | Write the name that is on   | First name                 | First name                                    |
|    | your government-issued picture identification (for example, your driver's | Middle name Parker         | Middle name                                   |
|    | license or passport   | Last name                  | Last name                                     |
|    | Bring your picture identification to your meeting with the trustee.       | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. | All other names you   |                            |   |
|    | have used in the last 8 years   | First name                 | First name                                    |
|    | Include your married or   | Middle name                | Middle name                                   |
|    | maiden names.   | Last name                  | Last name                                     |
|    |   | First name                 | First name                                    |
|    |   | Middle name                | Middle name                                   |
|    |   | Last name                  | Last name                                     |
| 3. | Only the last 4 digits of your Social                                     | XXX - XX- 4008             | xxx - xx-                                     |
|    | Security number or federal Individual                                     | OR                         | OR  |
|    | Taxpayer<br>Identification number<br>(ITIN)                               | 9 xx - xx-                 | 9 xx - xx-                                    |

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| D  | ebtor 1 Kenneth<br>First Name                          | Parker  Middle Name Last Name   | Case number (if known)   |
|----|--|---|--|
|    |  |   |  |
|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |
| 4. | Any business names and Employer                        | I have not used any business names or EINs.   | I have not used any business names or EINs.  |
|    | Identification Numbers (EIN) you have used in the last | Business name   | Business name  |
|    | 8 years  | Business name   | Business name  |
|    | Include trade names and doing business as names        | EIN   | EIN  |
|    |  | EIN   | EIN  |
| 5. | Where you live   |   | If Debtor 2 lives at a different address:  |
|    |  | Number Street   | Number Street  |
|    |  | Markham Illinois 60428 City State Zip Code  | City State Zip Code  |
|    |  | Cook  | City State Zip Code  |
|    |  | County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
|    |  | Number Street   | Number Street  |
|    |  | City State Zip Code   | City State Zip Code  |
| _  |  | City State Zip Code   | City State Zip Code  |
| 6. | Why you are choosing this district                     | Check one:  | Check one:   |
|    | to file for bankruptcy                                 | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                               |
|    |  | I have another reason. Explain. (See 28 U.S.C. §§ 1408.)  | I have another reason. Explain. (See 28 U.S.C. §§ 1408.)   |
|    |  |   |  |
|    |  |   |  |
|    |  |   |  |
|    |  |   |  |

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| Debtor 1 Kenneth  |  |  | Case number (if kno   | own)   |
|---|--|--|---|--|
| First Name  | Middle Name  | Last Name  |   |  |
| Part 2: Tell the Court Abo  | out Your Bankruptcy Case   | <b>ə</b>   |   |  |
| 7. The chapter of the<br>Bankruptcy Code you<br>are choosing to file<br>under   |  | scription of each, see <i>Notice Req</i><br>Also, go to the top of page 1 and  |   | C. § 342(b) for Individuals Filing for opriate box.  |
| 8. How you will pay the fee   | more details about hor cashier's check, or more may pay with a credit of the land of the l | ow you may pay. Typically, if you oney order If your attorney is card or check with a pre-printe in installments. If you choose ur Filing Fee in Installments (Coe be waived (You may request required to, waive your fee, an e that applies to your family sion, you must fill out the Applic | ou are paying the submitting you ed address. ethis option, sign official Form 103 this option only and may do so onlize and you are u | the clerk's office in your local court for e fee yourself, you may pay with cash, in payment on your behalf, your attorney an and attach the <i>Application for IA</i> .  If you are filing for Chapter 7. By law, a lay if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official) |
| 9. Have you filed for bankruptcy within the last 8 years?   | No.  Yes. District  District  District   | WhenWhenWhen   | MM / DD / YYYY  MM / DD / YYYY  MM / DD / YYYY  | Case number  Case number  Case number  |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Ves. Debtor District Debtor District   | WhenWhen   | MM / DD / YYYY  | Relationship to you  Case number, if known  Relationship to you  Case number, if known   |
| 11. Do you rent your residence?   | ✓ No. Go to line  ✓ Yes. Fill out <i>In</i>  |  |   | b you want to stay in your residence?  St You (Form 101A) and file it with   |

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Parker Debtor 1 Kenneth \_\_ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. **|** For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Kenneth Parker Case number (if known)
First Name Middle Name Last Name

#### Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Parker Debtor 1 Kenneth Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Kenneth Parker Signature of Debtor 1 Signature of Debtor 2 Executed on \_ 12/6/2016 Executed on MM / DD / YYYY MM / DD / YYYY

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| Debtor 1 Kenneth                                 |                            | Parker                | Case number (if ki           | no wn)   |
|--|----------------------------|-----------------------|------------------------------|--|
| First Name                                       | Middle Name                | Last Name             |                              |  |
| For your attorney, if you are represented by one | eligibility to proceed und | der Chapter 7, 11, 12 | 2, or 13 of title 11, United | ave informed the debtor(s) about States Code, and have explained the so certify that I have delivered to the |
| If you are not                                   | debtor(s) the notice requ  | ired by 11 U.S.C. §   | 342(b) and, in a case in w   | hich § 707(b)(4)(D) applies, certify that I  |
| represented by an                                | have no knowledge after    | an inquiry that the   | information in the schedu    | les filed with the petition is incorrect.  |
| attorney, you do not                             | 4.0                        |                       |                              |  |
| need to file this page.                          | /s/ Ayah Abdelhadi         |                       | Date                         | 12/6/2016  |
|  | Signature of Attorney f    | or Debtor             | MN                           | /I / DD / YYYY   |
|  |                            |                       |                              |  |
|  |                            |                       |                              |  |
|  | Ayah Abdelhadi             |                       |                              |  |
|  | Printed name               |                       |                              |  |
|  | Semrad Law Firm            |                       |                              |  |
|  | Firm name                  |                       |                              |  |
|  | 11101 S. Western Ave       | nue                   |                              |  |
|  | Street                     |                       |                              |  |
|  |                            |                       |                              |  |
|  |                            |                       |                              |  |
|  | Chicago                    |                       | Illinois                     | 60643  |
|  | City                       |                       | State                        | Zip Code   |
|  |                            |                       |                              |  |
|  | Contact phone              | 3123866421            | Email address                | aabdelhadi@semradlaw.com   |
|  |                            |                       |                              |  |
|  |                            |                       | Illinois                     |  |
|  | Bar number                 |                       | State                        |  |

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| Fill in this infor     | mation to identify your c | ase:        |                      |
|------------------------|---------------------------|-------------|----------------------|
| Debtor 1               | Kenneth                   |             | Parker               |
|                        | First Name                | Middle Name | Last Name            |
| Debtor 2               |                           |             |                      |
| (Spouse, if filing)    | First Name                | Middle Name | Last Name            |
| United States E        | Bankruptcy Court for the: | Northern    | District of Illinois |
|                        |                           |             | (State)              |
| Case number (If known) | -                         |             |                      |

|   | Check if | this    | is | an |
|---|----------|---------|----|----|
| _ | amende   | d filii | ng |    |

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$0.00<br>\$2,300.00<br>\$2,300.00<br>Your liabilities<br>Amount you owe<br>\$2,906.00<br>\$0.00 |
|--|--|
| 1b. Copy line 62, Total personal property, from Schedule A/B   | \$2,300.00  \$2,300.00  Your liabilities Amount you owe  \$2,906.00                              |
| 1c. Copy line 63, Total of all property on Schedule A/B  | \$2,300.00  Your liabilities Amount you owe  \$2,906.00  |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | Your liabilities Amount you owe \$2,906.00   |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | Amount you owe \$2,906.00  |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F   | Amount you owe \$2,906.00  |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F   | <u> </u>   |
| Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F   | <u> </u>   |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F   | \$0.00   |
|  |  |
|  |  |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>   | \$5,727.00   |
| Your total liabilities   | \$8,633.00   |
| art 3: Summarize Your Income and Expenses  |  |
| Schedule I: Your Income (Official Form 106I)   |  |
| Copy your combined monthly income from line 12 of <i>Schedule I</i>  | \$1,002.00   |
| Schedule J: Your Expenses (Official Form 106J)   | \$827.00   |

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| Deb         | otor 1 Kenneth   |                              | Parker   | Case number (if known)   |          |
|-------------|--|------------------------------|--|--|----------|
|             | First Name   | Middle Name                  | Last Name  |  |          |
| Part        | 4: Answer These Ques   | tions for Administrat        | ive and Statistical Records  |  |          |
| 6. <b>/</b> | Are you filing for bankruptcy                                  | under Chapters 7, 11, o      | r 13?  |  |          |
|             | No. You have nothing to r                                      | eport on this part of the fo | orm. Check this box and submit th  | is form to the court with your other sch                           | nedules. |
| ĺ           | ✓ Yes.   |                              |  |  |          |
| 7. <b>V</b> | What kind of debt do you hav                                   | e?                           |  |  |          |
|             |  |                              | mer debts are those incurred by a<br>Fill out lines 8-10 for statistical pur | in individual primarily for a personal,<br>poses. 28 U.S.C. § 159. |          |
|             | Your debts are not primathis form to the court with            |                              | ou have nothing to report on this p  | part of the form. Check this box and su                            | bmit     |
|             | From the Statement of Your<br>Form 122A-1 Line 11; OR, Fo      |                              | e: Copy your total current monthlorm 122C-1 Line 14.                         | y income from Official   | \$0.00   |
| 9.          | Copy the following special                                     | categories of claims fro     | om Part 4, line 6 of Schedule E/   | F:   |          |
|             | From Part 4 on Schedule E                                      | /F, copy the following:      |  | Total claim  |          |
|             | 9a. Domestic support obligat                                   | ions (Copy line 6a.)         |  | \$0.00   |          |
|             | 9b. Taxes and certain other of                                 | ebts you owe the govern      | ment. (Copy line 6b.)  | \$0.00   |          |
|             | 9c. Claims for death or person                                 | nal injury while you were    | intoxicated. (Copy line 6c.)   | \$0.00   |          |
|             | 9d. Student loans. (Copy line                                  | 6f.)                         |  | \$0.00   |          |
|             | 9e. Obligations arising out of priority claims. (Copy line 6g. |                              | or divorce that you did not report a   | \$0.00   |          |
|             | 9f. Debts to pension or profit                                 | -sharing plans, and other    | similar debts. (Copy line 6h.)   | \$0.00   |          |

\$0.00

9g. Total. Add lines 9a through 9f.

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| Fill in this                        | information to identify your   | case:   |  |   |   |  |
|-------------------------------------|--|---|--|---|---|--|
|                                     |  |   | 5  |   |   |  |
| Debtor 1                            | Kenneth<br>First Name  | Middle Na   |  | arker<br>ast Name   |   |  |
| Debtor 2<br>(Spouse, if fi          | ling) =:   | M: 1 11 N   | <u>.</u>   |   |   |  |
|                                     | - Thousand   | Middle Na   |  | ast Name  |   |  |
| United Sta                          | ates Bankruptcy Court for the:   | Northern  | District   | of Illinois<br>(State)  |   |  |
| Case num                            | nber   |   |  | (Otato)   |   |  |
| (If known)                          |  |   |  |   |   | Check if this is an                                    |
| Officia                             | al Form 106A/B   |   |  |   |   | amended filing   |
| Sche                                | dule A/B: Prope  | erty  |  |   |   | 12/1   |
| category<br>responsib<br>write your | where you think it fits best.<br>le for supplying correct info<br>name and case number (if | Be as complete an<br>rmation. If more sp<br>known). Answer ev | d accurate as p<br>ace is needed, a<br>ery question. | once. If an asset fits in more<br>ossible. If two married peop<br>attach a separate sheet to t<br>al Estate You Own or Ha | le are filing together, both a<br>his form. On the top of any a | re equally   |
|                                     |  |   | •  | building, land, or similar pro  |   |  |
| 1. D0 y0.                           | No. Go to Part 2   | quitable iliterest il   | any residence,                                       | bulluling, latiu, or sillinar pro   | operty:   |  |
|                                     | Yes. Where is the property?  |   |  |   |   |  |
|                                     | ,  |   | What is the pro                                      | perty? Check all that apply.  | Do not deduct secured   | claims or exemptions. Put                              |
| 1.1                                 | Street address, if available, or   | other description   | Single-family  |   |   | red claims on Schedule D:<br>nims Secured by Property. |
|                                     | Street address, ii available, oi   | other description   | Duplex or mi   | ulti-unit building  | Current value of the  | Current value of the                                   |
|                                     |  |   |  | m or cooperative  | entire property?  | portion you own?                                       |
|                                     |  |   | Land   | d or mobile home  |   |  |
|                                     | Number Street  |   | Investment p   | property  | Describe the nature of  |  |
|                                     | 0''  | 7'- 0-1-  | Timeshare<br>Other                                   |   | interest (such as fee s<br>the entireties, or a life            |  |
|                                     | City State   | Zip Code  | Other  |   |   |  |
|                                     |  |   |  | erest in the property? Check  |   | mmunity property                                       |
|                                     |  |   | one.  Debtor 1 onl                                   |   |   |  |
|                                     |  |   | Debtor 2 onl   |   |   |  |
|                                     |  |   |  | Debtor 2 only   |   |  |
|                                     |  |   | At least one   | of the debtors and another  |   |  |
|                                     |  |   |  | on you wish to add about th   | is item, such as local  |  |
| If you                              | own or have more than one,   |   | property identii                                     | ication number <u>:</u>   |   |  |
| ,                                   | ,  |   | What is the pro                                      | perty? Check all that apply.  |   | claims or exemptions. Put                              |
| 1.2                                 | Street address, if available, or   | other description   | Single-family  |   |   | red claims on Schedule D:<br>nims Secured by Property. |
|                                     |  |   | <u> </u>   | ulti-unit building  | Current value of the  | Current value of the                                   |
|                                     | -  |   |  | m or cooperative<br>d or mobile home  | entire property?  | portion you own?                                       |
|                                     | -  |   | Land   | a oooo  |   |  |
|                                     | Number Street  |   | Investment p   | property  | Describe the nature of interest (such as fee s                  |  |
|                                     | City State   | Zip Code  | Timeshare<br>Other                                   |   | the entireties, or a life                                       |  |
|                                     | Oity Otale   | Zip Gode  |  |   | Chack if this is co   | mmunity property                                       |
|                                     |  |   |  | erest in the property? Check  |   | minumity property                                      |
|                                     |  |   | one.  Debtor 1 onl                                   | M.  |   |  |
|                                     |  |   | Debtor 2 onl   |   |   |  |
|                                     |  |   |  | Debtor 2 only   |   |  |
|                                     |  |   | At least one   | of the debtors and another  |   |  |
|                                     |  |   |  | on you wish to add about th<br>ication number:  | is item, such as local  |  |

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| Debtor 1                      | Kenneth<br>First Name  | Middle Name                                     | Parker<br>Last Name   | Case number   | (if known)                             |   |
|-------------------------------|--|---|---|---------------|--|---|
|                               | nber Street  |   | What is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property     | apply.        | the amount of any secu                 | claims or exemptions. Put red claims on <i>Schedule D: ims Secured by Property.</i> Current value of the portion you own?  f your ownership |
| City                          | State  | []<br>[]<br>[]                                  | Timeshare Other  The has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and                           | other         | Check if this is co (see instructions) | estate), if known.  |
|                               | the dollar value of the po<br>ve attached for Part 1. W                      | p<br>rtion you own for a<br>rite that number he | roperty identification number:<br>III of your entries from Part 1, incluere.  |               |  |   |
| <b>Do you ow</b><br>you own t | hat someone else drives. If<br>ans, trucks, tractors, sport u                | equitable interest<br>you lease a vehicle, a    | in any vehicles, whether they are also report it on Schedule G: Executor cycles   | -             | -                                      |   |
| 3.1                           |  | Chevy<br>Impala<br>2005<br>200000               | Who has an interest in the propone.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors an   | ·             | the amount of any secu                 | claims or exemptions. Put used claims on Schedule D: aims Secured by Property.  Current value of the portion you own? \$680.00              |
| 3.2                           | Make Model: Year: Approximate mileage: Other information: 2001 Dodge Stratus | Dodge<br>Stratus<br>2001<br>200000              | Check if this is community instructions)  Who has an interest in the propone.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors an | perty? Check  | the amount of any secu                 | claims or exemptions. Put ared claims on <i>Schedule D: aims Secured by Property.</i> Current value of the portion you own?  \$575.00       |
|                               |  |   | Check if this is community instructions)  | property (see |  |   |

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|          | Kenneth<br>First Name   | Middle Name           | Parker  Last Name   | Case number   | er (if known)  |   |
|----------|---|-----------------------|---|---|--|---|
| 3.3      | Make<br>Model:<br>Year:<br>Approximate mileage:   |                       | Who has an interest in the prone.  Debtor 1 only  | operty? Check   |  | red claims on Schedule<br>ims Secured by Propert  |
|          | Other information:  |                       | Debtor 2 only Debtor 1 and Debtor 2 only  | ,   | Current value of the entire property?  | Current value of the portion you own?   |
|          |   |                       | At least one of the debtors   | and another   |  |   |
|          |   |                       | Check if this is communit instructions)   | ty property (see  |  |   |
| 3.4      | Make  |                       | Who has an interest in the pr   | operty? Check   | Do not deduct secured  | •   |
|          | Model:<br>Year:   |                       | one.  |   | the amount of any secu<br>Creditors Who Have Cla   |   |
|          | Approximate mileage:  |                       | Debtor 1 only   |   |  | ,   |
|          |   |                       | Debtor 2 only   |   | Current value of the<br>entire property?   | Current value of the portion you own?   |
|          | Other information:  |                       | Debtor 1 and Debtor 2 only  |   | entire property:   | portion you own:  |
|          |   |                       | At least one of the debtors   | and another   |  |   |
|          |   |                       | Check if this is communit instructions)   | ty property (see  |  |   |
|          | No<br>Yes   | , personal watercraft | , fishing vessels, snowmobiles, m   | otorcycle accessori   | ies  |   |
|          | No<br>Yes<br>Make<br>Model:   | , personal watercraft | Who has an interest in the prone.   | ·   | Do not deduct secured the amount of any secu   | red claims on <i>Schedule</i>   |
| ✓        | No<br>Yes<br>Make<br>Model:<br>Year:  | , personal watercrant | Who has an interest in the prone.  Debtor 1 only  | ·   | Do not deduct secured  | red claims on <i>Schedule</i>   |
| ✓        | No<br>Yes<br>Make<br>Model:   | , personal watercrant | Who has an interest in the prone.  Debtor 1 only Debtor 2 only  | roperty? Check  | Do not deduct secured the amount of any secu Creditors Who Have Cla  | red claims on Schedule ims Secured by Propert Current value of the  |
| <b>✓</b> | No<br>Yes<br>Make<br>Model:<br>Year:  | , personal watercraft | Who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only   | roperty? Check  | Do not deduct secured the amount of any secu Creditors Who Have Cla  | red claims on <i>Schedule</i>   |
| ✓        | No<br>Yes<br>Make<br>Model:<br>Year:<br>Approximate mileage:  | , personal watercraft | Who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors   | roperty? Check  | Do not deduct secured the amount of any secu Creditors Who Have Cla  | red claims on Schedule ims Secured by Propert Current value of the  |
| <b>✓</b> | No<br>Yes<br>Make<br>Model:<br>Year:<br>Approximate mileage:  |                       | Who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only   | roperty? Check  | Do not deduct secured the amount of any secu Creditors Who Have Cla  | red claims on Schedule ims Secured by Proper Current value of the   |
| 4.1      | No Yes  Make Model: Year: Approximate mileage: Other information:   |                       | Who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communitinstructions) Who has an interest in the prone   | roperty? Check and another ty property (see   | Do not deduct secured the amount of any secu Creditors Who Have Clas  Current value of the entire property?  Do not deduct secured   | red claims on Schedule ims Secured by Propertion Yellow Of the portion you own?   |
| 4.1      | No Yes  Make Model: Year: Approximate mileage: Other information:  Make Model:                            |                       | Who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communitinstructions) Who has an interest in the prone.  | roperty? Check and another ty property (see   | Do not deduct secured the amount of any secu Creditors Who Have Clas  Current value of the entire property?  Do not deduct secured the amount of any secu  | red claims on Schedule ims Secured by Property Current value of the portion you own?  claims or exemptions. I dred claims on Schedule                                       |
| 4.1      | No Yes  Make Model: Year: Approximate mileage: Other information:   |                       | Who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communities instructions)  Who has an interest in the prone. Debtor 1 only   | roperty? Check and another ty property (see   | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classifications Control of the Creditors Who Have Classification Creditors Control of the Secured Creditors Who Have Classification Creditors Control of the Secured Creditor Creditor Control of the Secured Creditor Creditor Control of the Secured Creditor C | red claims on Scheduk nims Secured by Propen Current value of the portion you own?  claims or exemptions. I   |
| 4.1      | No Yes  Make Model: Year: Approximate mileage: Other information:  Make Model: Year: Approximate mileage: | , personal watercraft | Who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communit instructions)  Who has an interest in the prone. Debtor 1 only Debtor 2 only  | and another ty property? Check  | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the  | claims on Schedule portion you own?  claims or exemptions. I ured claims on Schedule pims Secured by Propertion you of the portion you own?                                 |
| 4.1      | No Yes  Make Model: Year: Approximate mileage: Other information:  Make Model: Year:                      |                       | Who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communitinstructions)  Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 2 only                                 | and another ty property? Check  | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classifications Control of the Creditors Who Have Classification Creditors Control of the Secured Creditors Who Have Classification Creditors Control of the Secured Creditor Creditor Control of the Secured Creditor Creditor Control of the Secured Creditor C | claims or Schedule of the portion you own?  |
| 4.1      | No Yes  Make Model: Year: Approximate mileage: Other information:  Make Model: Year: Approximate mileage: | , personal watercraft | Who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communities instructions)  Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors | and another check coperty? Check coperty? Check cand another check can | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the  | claims or schedule portion you own?   |
| 4.1      | No Yes  Make Model: Year: Approximate mileage: Other information:  Make Model: Year: Approximate mileage: |                       | Who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communitinstructions)  Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 2 only                                 | and another check coperty? Check coperty? Check cand another check can | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the  | claims on Scheduk vims Secured by Proper  Current value of the portion you own?  claims or exemptions. I red claims on Scheduk vims Secured by Proper  Current value of the |

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Parker Debtor 1 Kenneth Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Misc. Household Goods \$350.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Misc. Electronics \$250.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$350.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Used Costume Jewelry \$50.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1000.00 for Part 3. Write that number here .....

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Debtor 1 Kenneth Parker Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ Yes ..... \$25.00 Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: Sherwin Williams Credit Union \$10.00 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: Sherwin Williams Credit Union \$10.00 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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| Deb | tor 1 Kenneth First Name                           | Middle Name   | Parker<br>Last Name                          | Case number (if known)                     |   |
|-----|--|---|--|--|---|
| 20. | Government and corp<br>Negotiable instruments      | orate bonds and other negotia<br>include personal checks, cashiers<br>ents are those you cannot transfe | ble and non-negotiable checks, promissory no | tes, and money orders.                     |   |
|     | No Yes. Give specific information about them       | Issuer name:  |  | , or contouring thom:                      |   |
|     |  |   |  |  |   |
|     |  |   |  |  |   |
| 21. | Retirement or pension<br>Examples: Interests in II |   | ), thrift savings accounts                   | , or other pension or profit-sharing plans |   |
|     | <b>✓</b> No  |   |  | · · · · · · · · · · · · · · · · · · ·      |   |
|     | Yes. List each account                             | Type of account:  | Institution name:                            |  |   |
|     | separately.  | 401(k) or similar plan:   |  |  | - |
|     |  | Pension plan: IRA:  |  |  | - |
|     |  | Retirement account:   |  |  |   |
|     |  | Keogh:  |  | _  |   |
|     |  | Additional account:   |  |  |   |
|     |  | Additional account:   |  |  |   |
| 22. |  | prepayments<br>d deposits you have made so that<br>with landlords, prepaid rent, publi                  |  |  |   |
|     | Yes  | Electric:   |  |  |   |
|     |  | Gas:  |  |  |   |
|     |  | Heating oil:  |  |  |   |
|     |  | Security deposit on rental unit:  |  |  |   |
|     |  | Prepaid rent:   |  |  |   |
|     |  | Telephone:  |  |  |   |
|     |  | Water:  |  | _  |   |
|     |  | Rented furniture:   |  | _  |   |
|     | /  | Other:  |  |  |   |
| 23. | No Yes   | or a periodic payment of money to<br>Issuer name and description:                                       | o you, either for life or foi                | a number of years)                         |   |
|     | -  |   |  |  |   |
|     |  |   |  |  |   |
|     |  |   |  |  |   |

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| Debt | or 1 Kenneth<br>First Name   | Parker  Middle Name Last Name  | Case number (if known)  |  |
|------|--|--|---|--|
| 24.  | Interests in a   | an education IRA, in an account in a qualified ABLE program, 530(b)(1), 529A(b), and 529(b)(1).  | or under a qualified state tuition program.   |  |
|      | ✓ No  Yes  | Institution name and description. Separately file the records of any   | y interests.11 U.S.C. § 521(c):   |  |
|      |  |  |   |  |
| 25.  | Truete equit   | able or future interests in property (other than anything listed   | Lin line 1) and rights or nowers  |  |
| 20.  | exercisable f  | for your benefit   | Till line 1,, and rights of powers  |  |
|      | ✓ No<br>Yes. Desc  | pribe  |   |  |
| 26.  |  | yrights, trademarks, trade secrets, and other intellectual pro   |   |  |
|      | No No  |  |   |  |
|      | Yes. Desc  | onde   |   |  |
| 27.  |  | nchises, and other general intangibles ilding permits, exclusive licenses, cooperative association holdings  | , liquor licenses, professional licenses  |  |
|      | ✓ No  Yes. Desc  | pribe  |   |  |
|      | ⊔  |  |   |  |
|      |  |  |   |  |
| Mor  | ney or propei  | rty owed to you?   |   | Current value of the portion you own?  Do not deduct secured claims or exemptions.   |
|      | Tax refunds or   |  |   | portion you own? Do not deduct secured   |
|      | Tax refunds o  |  | Federal:  | portion you own? Do not deduct secured   |
|      | Tax refunds or  No Yes. Give s about   | wed to you specific information at them, including whether already filed the returns   | Federal: State:   | portion you own?  Do not deduct secured claims or exemptions.  |
| 28.  | Tax refunds on  ✓ No  — Yes. Give s about you a and f  | specific information It them, including whether already filed the returns the tax years  |   | portion you own? Do not deduct secured claims or exemptions.   |
|      | Tax refunds or  No Yes. Give s about you a and t   | specific information It them, including whether already filed the returns the tax years  | State:<br>Local:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00   |
| 28.  | Tax refunds or  ✓ No  Yes. Give sabout you a and fi  Family support Examples: Past   | specific information It them, including whether already filed the returns the tax years  rt t due or lump sum alimony, spousal support, child support, maint   | State:<br>Local:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00   |
| 28.  | Tax refunds or  ✓ No  Yes. Give sabout you a and fi  Family support Examples: Past   | specific information It them, including whether already filed the returns the tax years  | State:  Local: enance, divorce settlement, property settlement  | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00   |
| 28.  | Tax refunds or  ✓ No  Yes. Give sabout you a and fi  Family support Examples: Past   | specific information It them, including whether already filed the returns the tax years  rt t due or lump sum alimony, spousal support, child support, maint   | State: Local: enance, divorce settlement, property settlement Alimony:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  t  \$0.00  |
| 28.  | Tax refunds or  ✓ No  Yes. Give sabout you a and fi  Family support Examples: Past   | specific information It them, including whether already filed the returns the tax years  rt t due or lump sum alimony, spousal support, child support, maint   | State: Local: enance, divorce settlement, property settlement Alimony: Maintenance:   | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 t \$0.00  |
| 29.  | Tax refunds or  ✓ No  ☐ Yes. Give s about you a and t  Family support Examples: Past ✓ No ☐ Yes. Give s                              | specific information It them, including whether already filed the returns the tax years  rt t due or lump sum alimony, spousal support, child support, maint specific information  | State: Local:  enance, divorce settlement, property settlement Alimony: Maintenance: Support:   | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t \$0.00 \$0.00 \$0.00   |
| 29.  | Tax refunds or  ✓ No  Yes. Give s about you a and to  Family support Examples: Past ✓ No  Yes. Give s  Other amount Examples: Unp    | specific information It them, including whether already filed the returns the tax years  rt t due or lump sum alimony, spousal support, child support, maint   | State: Local:  enance, divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 |
| 29.  | Tax refunds on  ✓ No  ✓ Yes. Give s about you a and if  Family suppor Examples: Past ✓ No  ✓ Yes. Give s  Other amount Examples: Unp | specific information  It them, including whether already filed the returns the tax years  It due or lump sum alimony, spousal support, child support, maint specific information  Its someone owes you paid wages, disability insurance payments, disability benefits, sick point security benefits; unpaid loans you made to someone else | State: Local:  enance, divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00   |
| 29.  | Tax refunds on  No Yes. Give s about you a and t  Family suppor Examples: Past  No Yes. Give s  Other amount Examples: Unp           | specific information  It them, including whether already filed the returns the tax years  It due or lump sum alimony, spousal support, child support, maint specific information  Its someone owes you paid wages, disability insurance payments, disability benefits, sick point security benefits; unpaid loans you made to someone else | State: Local:  enance, divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00   |

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| Deb  | tor 1 Kenneth  |                          | Parker   | Case number (if known)                         |  |
|------|--|--------------------------|--|--|--|
|      | First Name   | Middle Nam               | e Last Name  |  |  |
| 31.  | Interests in insurance Examples: Health, disab           |                          | ealth savings account (HSA); credit, h                               | nomeowner's, or renter's insurance             |  |
|      | No Yes. Name the insu of each policy and I               |                          | Company name:  | Beneficiary:                                   | Surrender or refund value:   |
| 32.  |  | of a living trust, expec | n someone who has died<br>proceeds from a life insurance polic       | y, or are currently entitled to receive        |  |
| 33.  |  |                          | you have filed a lawsuit or made<br>surance claims, or rights to sue | a demand for payment                           |  |
| 34.  | Other contingent and to set off claims  No Yes. Describe | unliquidated claims c    | f every nature, including counter                                    | claims of the debtor and rights                |  |
| 35.  | Any financial assets your No Yes. Describe               | ou did not already list  |  |  |  |
| 36.  |  | -                        | om Part 4, including any entries fo                                  |  | \$45.00  |
| Part |  |                          |  | nterest In. List any real estate in Par        | t 1.   |
| 37.  | No. Go to Part 6.  Yes. Go to line 38.                   | ny legal or equitable i  | nterest in any business-related pr                                   |  | Current value of the cortion you own? Do not deduct secured claims or exemptions |
| 38.  | Accounts receivable of No Yes. Describe                  | or commissions you al    | ready earned   |  |  |
| 39.  | Office equipment, furn<br>Examples: Business-related No  |                          | re, modems, printers, copiers, fax ma                                | achines, rugs, telephones, desks, chairs, elec | tronic devices   |
|      |  |                          |  |  |  |

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| Debt         | tor 1 Kenneth   | Parker                                    | Case number (if known)         |                              |
|--------------|---|---|--------------------------------|------------------------------|
|              | First Name Middle Nam   | e Last Name                               |                                |                              |
| 40.          | Machinery, fixtures, equipment, supplies yo   | u use in business, and tools of your t    | rade                           |                              |
|              | <b></b> No  |   |                                |                              |
|              | <u> </u>  |   |                                |                              |
|              | Yes. Describe   |   |                                |                              |
|              |   |   |                                |                              |
| 41           | Inventory   |   |                                |                              |
| 41.          | inventory   |   |                                |                              |
|              | <b>✓</b> No   |   |                                |                              |
|              | Yes. Describe   |   |                                |                              |
|              |   |   |                                |                              |
|              |   |   |                                |                              |
| 42.          | Interests in partnerships or joint ventures   |   |                                |                              |
|              | ✓ No  |   |                                |                              |
|              |   | Name of entity:                           | % of ownership:                |                              |
|              | Yes. Give specific information about  |   |                                |                              |
|              | them  |   |                                | <del>_</del>                 |
|              |   |   |                                |                              |
|              |   |   |                                |                              |
|              |   |   |                                | _                            |
| 43. <b>(</b> | Customer lists, mailing lists, or other compile                                     | ations                                    |                                |                              |
|              | <b>✓</b> No   |   |                                |                              |
|              | Yes. Do your lists include personally identif                                       | iable information (as defined in 11 U.S.) | C 8 101(41A))?                 |                              |
|              | La con de your note monade personany rasman   | acio internation (ac acimea in 11 cier    | 0.3.0.(, 4).                   |                              |
|              | No  |   |                                |                              |
|              | Yes. Describe   |   |                                |                              |
|              |   |   |                                | ·                            |
| 44.          | Any business-related property you did not a   | Iready list                               |                                |                              |
|              |   | -   |                                |                              |
|              | <b>✓</b> No   | ·   |                                |                              |
|              | Yes. Give specific  |   |                                |                              |
|              | information   |   |                                | <del></del>                  |
|              |   |   |                                |                              |
|              |   |   |                                |                              |
|              |   |   |                                |                              |
|              |   |   |                                |                              |
|              |   |   |                                |                              |
|              |   |   |                                |                              |
|              |   |   |                                |                              |
| 45. A        | dd the dollar value of all of your entries from                                     | Part 5, including any entries for page    | jes you have attached          |                              |
| for Pa       | art 5. Write that number here   |   |                                |                              |
| <u></u>      | D 11 A . E 10   |   | 0                              |                              |
| Part         | Describe Any Farm- and Commerce If you own or have an interest in farmland, list it |   | ou Own or Have an Interest In. |                              |
|              | ii you own or have an interest in farmand, list i                                   | t III Fait I.                             |                                |                              |
| 46.          | Do you own or have any legal or equitable i   | nterest in any farm- or commercial f      | ishing-related property?       |                              |
|              | No. Go to Part 7.   |   |                                | Current value of the         |
|              |   |   |                                | portion you own?             |
|              | Yes. Go to line 47.   |   |                                | Do not deduct secured claims |
| 47           | Farm animala  |   |                                | or exemptions                |
| 47.          | Farm animals  Examples: Livestock, poultry, farm-raised fish                        |   |                                |                              |
|              | Livestock, poultry, raint-raised lish   |   |                                |                              |
|              | <b>✓</b> No   |   |                                |                              |
|              | Yes. Describe   |   |                                |                              |
|              | _   |   |                                |                              |
|              |   |   |                                |                              |

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| Debt         | tor 1 Kenneth First Name   |   | Parker<br>Last Name    | Case number (if known)         |             |
|--------------|----------------------------|---|------------------------|--------------------------------|-------------|
| 48.          | Crops-either growing       |   |                        |                                |             |
|              | No Yes. Describe           |   |                        |                                |             |
| 49.          | Farm and fishing equip     | oment, implements, machinery, fixtur                                  | es, and tools of trade |                                |             |
|              | <b>✓</b> No                |   |                        |                                |             |
|              | Yes. Describe              |   |                        |                                |             |
| 50.          | Farm and fishing suppl     | lies, chemicals, and feed   |                        |                                |             |
|              | <b>✓</b> No                |   |                        |                                |             |
|              | Yes. Describe              |   |                        |                                |             |
|              |                            |   | and all made Park      |                                |             |
| 51.          |                            | rcial fishing-related property you did                                | not aiready list       |                                |             |
|              | ✓ No  Yes. Describe        |   |                        |                                |             |
|              |                            |   |                        |                                |             |
|              |                            | l of your entries from Part 6, includin                               |                        | u have attached                |             |
|              |                            |   |                        | _                              |             |
|              |                            |   |                        |                                |             |
| Part '       |                            | perty You Own or Have an Intere                                       |                        | List Above                     |             |
| 53.          |                            | perty of any kind you did not already l<br>s, country club membership | list?                  |                                |             |
|              | ✓ No                       |   |                        |                                |             |
|              | Yes. Give specific         |   |                        |                                |             |
|              | information                |   |                        |                                |             |
|              |                            |   |                        |                                |             |
| 54. A        | dd the dollar value of al  | I of your entries from Part 7. Write th                               | at number here         |                                | <u> </u>    |
|              |                            |   |                        |                                |             |
|              |                            |   |                        |                                |             |
|              |                            |   |                        |                                |             |
| Part         | 8: List the Totals of      | Each Part of this Form  |                        |                                |             |
| 55. <b>F</b> |                            | , line 2  |                        | <b>&gt;</b>                    |             |
| 56. <b>r</b> | oart 2 total vehicles, lin | e 5   | \$1255.00              |                                |             |
| 57. <b>P</b> | art 3: Total personal an   | d household items, line 15  | \$1000.00              |                                |             |
| 58. <b>P</b> | art 4: Total financial as  | sets, line 36   | \$45.00                |                                |             |
| 59. <b>F</b> | Part 5: Total business-re  | elated property, line 45  |                        |                                |             |
| 60. <b>F</b> | Part 6: Total farm- and f  | ishing-related property, line 52                                      |                        |                                |             |
| 61. <b>F</b> | Part 7: Total other prop   | erty not listed, line 54  |                        |                                |             |
| 62.1         | Fotal personal property.   | Add lines 56 through 61   | \$2300.00              | Copy personal property total ▶ | + \$2300.00 |
|              |                            |   |                        |                                | \$2300.00   |
| 63. <b>T</b> | otal of all property on S  | chedule A/B. Add line 55 + line 62                                    |                        |                                |             |

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| Fill in this infor     | mation to identify your ca | se.            | . age 10 c                                  |  |                 |
|------------------------|----------------------------|----------------|---|--|-----------------|
| Debtor 1               | Kenneth                    | 50.            | Parker                                      |  |                 |
|                        | First Name                 | Middle Name    | Last Name                                   |  |                 |
| Debtor 2               |                            |                |   |  |                 |
| (Spouse, if filing)    | First Name                 | Middle Name    | Last Name                                   |  |                 |
| United States E        | Bankruptcy Court for the:  | Northern       | District of Illinois                        |  |                 |
|                        |                            |                | (State)                                     |  |                 |
| Case number (If known) | -                          |                |   |  |                 |
| · ,                    | Farma 1000                 |                |   |  | ck if this is a |
| Omiciai                | Form 106C                  |                |   | ame  | ended filing    |
| Schedul                | e C: The Prope             | erty You Clain | n as Exempt                                 |  | 12/1            |
| Dl-                    |                            | -: - -  6      | and a sup filter of the scatter of the atte | a ava agusallu vaan anailala fay aynah ing aanwa | 1               |

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pai | t 1: Identify the Property You Clair   | n as Exempt   |   |   |  |  |  |
|-----|--|---|---|---|--|--|--|
| 1.  | Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.  ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) |   |   |   |  |  |  |
| 2.  | For any property you list on Schedule A  | /B that you claim as e  | xempt, fill in the information below.   |   |  |  |  |
|     | Brief description of the property and line on Schedule A/B that lists this property  | Current value of<br>the portion you<br>own<br>Copy the value from<br>Schedule A/B | Amount of the exemption you claim  Check only one box for each exemption.                           | Specific laws that allow exemption              |  |  |  |
|     | Brief description: Chevy Impala, 2005, 2005 Chevy Impala Line from Schedule A/B: 03  | \$680.00  | \$680.00  100% of fair market value, up to any applicable statutory limit                           | 735 ILCS 5/12-1001(c); 735 ILCS<br>5/12-1001(b) |  |  |  |
|     | Brief description:  Dodge Stratus, 2001, 2001 Dodge Stratus  Line from Schedule A/B:  03   | \$575.00  | \$0 100% of fair market value, up to any applicable statutory limit                                 | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b)    |  |  |  |
| 3.  | ✓ No   | ery 3 years after that for a  | 375? cases filed on or after the date of adjustment.) rithin 1,215 days before you filed this case? |   |  |  |  |

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| rt 2: Additional Page   |   |   |                                    |
|---|---|---|------------------------------------|
| Brief description of the property and line on Schedule A/B that lists this property | Current value of<br>the portion you<br>own  Copy the value from<br>Schedule A/B | Amount of the exemption you claim  Check only one box for each exemption. | Specific laws that allow exemption |
| Brief description: Sherwin Williams Credit Union Line from Schedule A/B: 17         | \$10.00   | \$0  100% of fair market value, up to any applicable statutory limit      | 735 ILCS 5/12-1001(b)              |
| Brief description: Sherwin Williams Credit Union Line from Schedule A/B:  17        | \$10.00   | \$10.00  100% of fair market value, up to any applicable statutory limit  | 735 ILCS 5/12-1001(b)              |
| Brief description:  Misc. Household Goods Line from Schedule A/B: 06                | \$350.00  | \$350.00  100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b)              |
| Brief description: Used Clothing Line from Schedule A/B: 11                         | \$350.00  | \$350.00  100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(a)              |
| Brief description:  Misc. Electronics  Line from Schedule A/B: 07                   | \$250.00  | \$250.00  100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b)              |
| Brief description: Used Costume Jewelry Line from Schedule A/B: 12                  | \$50.00   | \$50.00  100% of fair market value, up to any applicable statutory limit  | 735 ILCS 5/12-1001(b)              |
| Brief description: Cash on Hand Line from Schedule A/B: 16                          | \$25.00   | \$25.00  100% of fair market value, up to any applicable statutory limit  | 735 ILCS 5/12-1001(b)              |

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| Fill in     | this information to identify you                  | ır case:                                |   |  |                          |                                       |
|-------------|---|---|---|--|--------------------------|---------------------------------------|
|             |   |   | 5.1   |  |                          |                                       |
| Debto       | or 1 Kenneth First Name                           | Middle Name                             | Parker<br>Last Name   |  |                          |                                       |
| Debto       |   | ivildale name                           | Last Name   |  |                          |                                       |
| (Spous      | e, if filing) First Name                          | Middle Name                             | Last Name   |  |                          |                                       |
| United      | d States Bankruptcy Court for th                  | ne: Northern                            | District of Illinois  |  |                          |                                       |
| Case        | number  |   | (State)   |  |                          |                                       |
| (If know    | vn)   |   |   |  | _                        | <b>.</b>                              |
|             | icial Form 106                                    | _                                       |   |  |                          | Check if this is an<br>amended filing |
| Scl         | nedule D: Cred                                    | litors Who Ha                           | ve Claims Secure  | ed by Prop                             | erty                     | 12/15                                 |
|             |   |   | e are filing together, both are equ<br>nber the entries, and attach it to t |  |                          |                                       |
| name        | and case number (if known).                       |   |   |  |                          |                                       |
| 1. <b>[</b> | Oo any creditors have claim                       |   | •   |  |                          |                                       |
| [           | _   |   | with your other schedules. You have   | e nothing else to rep                  | ort on this form.        |                                       |
| [           | Yes. Fill in all of the inform                    | nation below.                           |   |  |                          |                                       |
| Part        | 1: List All Secured Claim                         | is                                      |   |  |                          |                                       |
| 2.          | List all secured claims. If a                     | creditor has more than one sec          | cured claim, list the creditor  | Column A                               | Column B                 | Column C                              |
|             |   | •                                       | ticular claim, list the other creditors                                     | Amount of claim                        | Value of                 | Unsecured                             |
|             | name.   | e, list the ciaims in alphabetical      | order according to the creditor's   | Do not deduct the value of collateral. | collateral that supports | portion<br>If any                     |
|             | namo.   |   |   | value of collateral.                   | this claim               | II ally                               |
| 2.1         | SHERWIN WILLIAMS CREDI                            | — Describe the property                 | that secures the claim:   | \$1,106.00                             | \$10.00                  | \$1,096.00                            |
|             | Creditor's Name 16230 PRINCE DR                   | 012 InstallmentLoan                     | That seemed the slamm   |  |                          |                                       |
|             | Number Street                                     |   | , the claim is: Check all that apply.                                       |  |                          |                                       |
|             |   | Contingent                              |   |  |                          |                                       |
|             | SOUTH   | Unliquidated                            |   |  |                          |                                       |
|             | HOLLAND Illinois 60473                            |   |   |  |                          |                                       |
|             | City State ZIP Coo<br>Who owes the debt? Check of |   | all that apply  |  |                          |                                       |
|             | ✓ Debtor 1 only                                   | _                                       | made (such as mortgage or secured   |  |                          |                                       |
|             | Debtor 2 only                                     | car loan)                               | made (such as mongage of secured  |  |                          |                                       |
|             | Debtor 1 and Debtor 2 on                          | ly Statutory lien (such                 | as tax lien, mechanic's lien)   |  |                          |                                       |
|             | At least one of the debtors                       | Judgment lien fron                      | n a lawsuit   |  |                          |                                       |
|             | and another  Check if this claim relat            | Other (including a r                    | ight to offset)   |  |                          |                                       |
|             | to a community debt                               | Last 4 digits of accou                  | nt number 0041  |  |                          |                                       |
|             | Date debt was 10/1/20 incurred                    | 016                                     |   |  |                          |                                       |
| 2.2         | SHERWIN WILLIAMS CREDI                            | Describe the property                   | that accuracy the alaims  | \$600.00                               | \$10.00                  | \$590.00                              |
|             | Creditor's Name                                   | 006 InstallmentLoan                     | that secures the claim:   |  |                          |                                       |
|             | 16230 PRINCE DR  Number Street                    |   | the claim is: Check all that apply.   |  |                          |                                       |
|             |   | Contingent                              |   |  |                          |                                       |
|             | SOUTH   | Unliquidated                            |   |  |                          |                                       |
|             | HOLLAND Illinois 60473                            |   |   |  |                          |                                       |
|             | City State ZIP Coo<br>Who owes the debt? Check of | ae 🗀 .                                  | all that apply  |  |                          |                                       |
|             | ✓ Debtor 1 only                                   |   |   |  |                          |                                       |
|             | Debtor 2 only                                     | car loan)                               | made (such as mortgage or secured   |  |                          |                                       |
|             | Debtor 1 and Debtor 2 on                          | ly Statutory lien (such                 | as tax lien, mechanic's lien)   |  |                          |                                       |
|             | At least one of the debtors                       | Judgment lien from                      | n a lawsuit   |  |                          |                                       |
|             | and another  Check if this claim relat            | Other (including a r                    | ight to offset)   |  |                          |                                       |
|             | to a community debt                               | Last 4 digits of accou                  | nt number 0042  |  |                          |                                       |
|             | Date debt was 11/1/20 incurred                    | )16                                     |   |  |                          |                                       |
|             |   | e of your entries in Column A           | A on this page. Write that number   | \$1,706.00                             |                          |                                       |
|             | 1   | • |   | I — · · · · · · · · · · · · · · · ·    |                          |                                       |

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| Debtor 1 K   |   |   | Parker   | Case n  | umber (if known)                                       |                                   |          |
|--|---|---|--|---|--|-----------------------------------|----------|
| Fi   |   | liddle Name   | Last Name  |   |  |                                   |          |
| Additional Page  Part:1  After listing any entries on t 2.4, and so forth. |   | this page, number them beginning with 2.3, followed by  |  | Column A  Amount of claim  Do not deduct the value of collateral. | Column B  Value of collateral that supports this claim | Column C Unsecured portion If any |          |
| Credit 3159 No Chic City Who   | is Title Loan  for's Name  9 W Cermak Rd  umber Street  ago Illinois 60623  State ZIP Code  owes the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  a debt was | Dodge Stratus As of the date Contingent Unliquidate Disputed Nature of lien. An agreeme car loan) Statutory lie Judgment Other (inclu | Check all that apply.  ent you made (such as moren (such as tax lien, mecharlien from a lawsuit  ding a right to offset) | ck all that apply.  |  | \$575.00                          | \$625.00 |
| incu   |   | Last 4 digits o   | f account number   |   |  |                                   |          |
|  | Add the dollar value of you here:   | ur entries in Colu  | ımn A on this page. Write  | that number   | \$1,200.00   |                                   |          |
|  | If this is the last page of your write that number here:  | our form, add the   | e dollar value totals from   | all pages.  | \$2,906.00   |                                   |          |

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| Fill                                   | in this infor   | mation to identify your c   | ase:   |   |   |  |   |   |
|--|---|---|--|---|---|--|---|---|
| Deb                                    | otor 1  | Kenneth   |  | Parker  |   |  |   |   |
|  |   | First Name  | Middle Name  | Last Name   |   |  |   |   |
|  | otor 2  |   |  |   |   |  |   |   |
| (Spc                                   | use, if filing)   | First Name  | Middle Name  | Last Name   |   |  |   |   |
| Uni                                    | ted States B  | Sankruptcy Court for the:   | Northern   | District of Illinois  |   |  |   |   |
|  |   |   |  | (State)   |   |  |   |   |
|  | se number<br>lown)  |   |  |   |   |  |   |   |
| Of                                     | ficial F  | orm 106E/F  |  |   |   | Ch   | eck if this is a                                  | n amended filing                                  |
| _                                      |   |   | 1 \\   |   |   |  |   |   |
| S                                      | chedu   | lie E/F: Cre  | editors Who  | Have Unsec  | cured Claims  |  |   | 12/15   |
| othe<br>Forn<br>clair<br>the (<br>knov | er party to a<br>n 106A/B) a<br>ns that are<br>entries in t<br>wn). | any executory contracts<br>and on <i>Schedule G: Exe</i><br>Ilisted in <i>Schedule D: C</i><br>he boxes on the left. At | s or unexpired leases that<br>cutory Contracts and Une<br>Creditors Who Hold Claims              | could result in a claim. A<br>expired Leases (Official Fo<br>Secured by Property. If n        | and Part 2 for creditors with<br>Also list executory contracts<br>form 106G). Do not include a<br>more space is needed, copy<br>op of any additional pages, v | s on <i>Sched</i><br>iny credito<br>the Part y | lule A/B: Pro<br>ers with partia<br>ou need, fill | perty (Official<br>ally secured<br>it out, number |
| 1.                                     | Do any cr   | reditors have priority un   | secured claims against y   | ou?   |   |  |   |   |
|  | <b>√</b> No. 0  | Go to Part 2.   |  |   |   |  |   |   |
|  | Yes.  |   |  |   |   |  |   |   |
| 2.                                     | listed, ider<br>As much a<br>Continuat                              | ntify what type of claim it<br>as possible, list the claims<br>ion Page of Part 1. If mor                               | is. If a claim has both priorit<br>in alphabetical order accord<br>e than one creditor holds a p | y and nonpriority amounts,<br>ding to the creditor's name.<br>particular claim, list the othe |   | both priorit                                   | y and nonprio                                     | ority amounts.                                    |
|  | (For an ex  | planation of each type of   | claim, see the instructions f  | or this form in the instruction   | on booklet.)  |  | Driority  |   |

claim

amount

amount

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Parker Debtor 1 Kenneth Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 CAPITAL ONE BANK USA, NA \$1.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 11013 W BROAD ST Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated GLEN ALLEN Virginia 23060 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt General Unseucred Other. Specify \_\_ Is the claim subject to offset? **✓** No Yes Cash America \$1,200.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 100 West 7th Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Fort Worth Texas 76102 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ Payday Loan Is the claim subject to offset? **✓** No Yes 4.3 Comcast \$200.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 11621 E. Marginal Way # 5 Number As of the date you file, the claim is: Check all that apply. Bankruptcy Dept Contingent Unliquidated Washington 98168 Seattle City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ Cable Bill Is the claim subject to offset? **✓** No Yes

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Parker Debtor 1 Kenneth Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 ComEd \$300.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3 Lincoln Center n/a Street Number As of the date you file, the claim is: Check all that apply. Bankruptcy Section Contingent Unliquidated 60181 Oakbrook Terrace Illinois State Zip Code City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ Electric Bill Is the claim subject to offset? **✓** No Yes **COMNWLTH FIN** 4.5 \$1,137.00 Last 4 digits of account number Nonpriority Creditor's Name 10/1/2014 When was the debt incurred? 960 N MAIN STREET Number Street As of the date you file, the claim is: Check all that apply. Contingent **SCRANTON** Pennsylvania 18508 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts 001 Collection; Collecting for Is the claim subject to offset? Other. Specify ORIGINAL CREDITOR: MEDICAL **✓** No Yes CONTINENTAL \$700.00 4.6 Last 4 digits of account number \_ Nonpriority Creditor's Name When was the debt incurred? C/O SECURITY FINAN POB 3146 n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated **SPARTANBURG** South Carolina 29304 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims

✓ No Yes

At least one of the debtors and another

Is the claim subject to offset?

Check if this claim relates to a community debt

debts

Other. Specify \_

Debts to pension or profit-sharing plans, and other similar

Credit Card

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 Debtor 1 First Name
 Kenneth First Name
 Parker Last Name
 Case number (if known)

| Part 2 | Your NONPRIORITY Unsecured Claims - Continua  | ation Page  |             |
|--------|---|---|-------------|
|        | After listing any entries on this page, number them beginning                             | g with 4.5, followed by 4.6, and so forth.  | Total claim |
| 4.7    | MIDLAND FUND  | Last 4 digits of account number   | \$1.00      |
|        | Nonpriority Creditor's Name<br>8875 Aero Drive # 200                                      | When was the debt incurred?n/a  |             |
|        | Number Street   | As of the date you file, the claim is: Check all that apply.  |             |
|        |   | Contingent  |             |
|        | San Diego California 92123  | Unliquidated  |             |
|        | City State Zip Code   | _ Disputed  |             |
|        | Who incurred the debt? Check one.  Debtor 1 only  | Type of NONPRIORITY unsecured claim:  |             |
|        | <u> </u>  | Student loans   |             |
|        | Debtor 2 only  Debtor 1 and Debtor 2 only   | Obligations arising out of a separation agreement or divorce  |             |
|        | At least one of the debtors and another   | that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar |             |
|        | 블   | debts   |             |
|        | Check if this claim relates to a community debt Is the claim subject to offset?           | Other. Specify General Unseucred  |             |
|        | No  |   |             |
|        | Yes   |   |             |
| 4.8    | Nicor Gas   |   | \$400.00    |
| 1.0    | Nonpriority Creditor's Name   | Last 4 digits of account number   | Ψ100.00     |
|        | PO Box 5407<br>Number Street  | When was the debt incurred?n/a  |             |
|        |   | As of the date you file, the claim is: Check all that apply.  |             |
|        |   | Contingent  |             |
|        | Carol Stream         Illinois         60197           City         State         Zip Code | Unliquidated  |             |
|        | Who incurred the debt? Check one.   | Disputed  |             |
|        | Debtor 1 only   | Type of NONPRIORITY unsecured claim:  |             |
|        | Debtor 2 only   | Student loans   |             |
|        | Debtor 1 and Debtor 2 only  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
|        | At least one of the debtors and another   | Debts to pension or profit-sharing plans, and other similar debts                                       |             |
|        | Check if this claim relates to a community debt   | Other. Specify Gas Bill   |             |
|        | Is the claim subject to offset?   |   |             |
|        | <u>✓</u> No   |   |             |
|        | Yes   |   |             |
| 4.9    | PORTFOLIO<br>Nonpriority Creditor's Name  | Last 4 digits of account number   | \$1.00      |
|        | 120 CORPORATE BLVD, STE 1   | When was the debt incurred?n/a  |             |
|        | Number Street   | As of the date you file, the claim is: Check all that apply.  |             |
|        |   | Contingent  |             |
|        | NORFOLK Virginia 23502  | Unliquidated  |             |
|        | City State Zip Code   | Disputed  |             |
|        | Who incurred the debt? Check one.  Debtor 1 only  | Type of NONPRIORITY unsecured claim:  |             |
|        | Debtor 2 only   | Student loans   |             |
|        | Debtor 1 and Debtor 2 only  | Obligations arising out of a separation agreement or divorce  |             |
|        | At least one of the debtors and another   | that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar |             |
|        | Check if this claim relates to a community debt   | debts   |             |
|        | Is the claim subject to offset?   | Other. Specify General Unsecured  |             |
|        | ✓ No  |   |             |
|        | Yes   |   |             |

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Parker Debtor 1 Kenneth Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 Sprint \$1,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a P.O. Box 219554 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 64121 Kansas City Missouri State Zip Code City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Cell Phone Bill Is the claim subject to offset? **✓** No Yes STELLAR RECOVERY INC 4.11 \$45.00 Last 4 digits of account number 0340 Nonpriority Creditor's Name When was the debt incurred? 5/1/2016 4500 Salisbury Rd Ste 10 Number Street As of the date you file, the claim is: Check all that apply. Contingent Jacksonville Florida 32216 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for **|** ORIGINAL CREDITOR: DISH **✓** No **NETWORK** Other. Specify Yes 4.12 WORLD FINANCE CORPORAT \$742.00 Last 4 digits of account number \_\_ Nonpriority Creditor's Name When was the debt incurred? 6/1/2015 5519 EAST 82ND STREET Number Street As of the date you file, the claim is: Check all that apply. Contingent **INDIANAPOLIS** Indiana 46250 Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify \_ 012 InstallmentLoan

✓ No Yes Case 16-38434 Doc 1 Filed 12/06/16 Entered 12/06/16 10:57:40 Desc Main Document Page 29 of 69

| Debtor 1            | Kenneth<br>First Name  |                                     | Middle Name                                      | Parker<br>Last Name  | Case nu                               | umber (if known)   |  |  |  |  |
|---------------------|--|-------------------------------------|--|--|---------------------------------------|--|--|--|--|--|
| Part 3:             | t 3: List Others to Be Notified About a Debt That You Already Listed |                                     |  |  |                                       |  |  |  |  |  |
| coli<br>coli<br>cre | ection agency is t<br>lection agency her<br>ditors here. If you      | rying to colled<br>e. Similarly, if | ct from you for a debt y<br>you have more than o | ou owe to someone ne creditor for any o                                | else, list the or<br>f the debts that | a already listed in Parts 1 or 2. For example, if a iginal creditor in Parts 1 or 2, then list the you listed in Parts 1 or 2, list the additional 2, do not fill out or submit this page. |  |  |  |  |
| Ver<br>Nar          |  |                                     |  | On which entry in Part 1 or Part 2 did you list the original creditor? |                                       |  |  |  |  |  |
| РО                  | Box 8099   |                                     |  | Line 4.6   | of (Check                             | Part 1: Creditors with Priority Unsecured Claims   |  |  |  |  |
| Nu<br>—             | mber Street  |                                     |  | -  | one):                                 | Part 2: Creditors with Nonpriority Unsecured Claims  |  |  |  |  |
| Ne                  | wark   | Delaware                            | 19714  | Last 4 digits of ac  | count number                          |  |  |  |  |  |
| Cit                 | <i></i>  | State                               | Zip Code   |  |                                       | <del></del>  |  |  |  |  |

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Debtor 1 Kenneth Parker Case number (if known)

| First Nar                | ne Middle Name Last Name   |     |  |         |              |     |  |
|--------------------------|--|-----|--|---------|--------------|-----|--|
| Part 4: Add th           | e Amounts for Each Type of Unsecured Claim   |     |  |         |              |     |  |
|                          | mounts of certain types of unsecured claims. This information is<br>nounts for each type of unsecured claim. |     | tatistical reporting purpose  Total claims | s only. | 28 U.S.C. §1 | 59. |  |
|                          |  |     | Total olalillo                             |         |              |     |  |
| Total claims from Part 1 | 6a. Domestic support obligations.  | 6a. | \$0.00                                     |         |              |     |  |
|                          | 6b. Taxes and certain other debts you owe the government   | 6b. | \$0.00                                     |         |              |     |  |
|                          | 6c. Claims for death or personal injury while you were intoxicated   | 6c. | \$0.00                                     |         |              |     |  |
|                          | 6d. Other. Add all other priority unsecured claims. Write that amount here.                                  | 6d. | \$0.00                                     |         |              |     |  |
|                          | 6e. Total. Add lines 6a through 6d.  | 6e. | \$0.00                                     |         |              |     |  |
|                          |  |     | Total claims                               |         |              |     |  |
| Total claims from Part 2 | 6f. Student loans  | 6f. | \$0.00                                     |         |              |     |  |
|                          | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims  | 6g. | \$0.00                                     |         |              |     |  |
|                          | 6h. Debts to pension or profit-sharing plans, and other similar debts  | 6h. | \$0.00                                     |         |              |     |  |
|                          | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.                               | 6i. | \$5,727.00                                 |         |              |     |  |
|                          | C: Tatal Addings Of through C:   | c:  | \$5,727.00                                 |         |              |     |  |

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| Fill in this information to identify your case: |                           |             |                              |         |  |  |  |
|---|---------------------------|-------------|------------------------------|---------|--|--|--|
| Debtor 1  | Kenneth                   |             | Parker                       |         |  |  |  |
|   | First Name                | Middle Name | Last Name                    | <u></u> |  |  |  |
| Debtor 2  |                           |             |                              |         |  |  |  |
| (Spouse, if filing)                             | First Name                | Middle Name | Last Name                    |         |  |  |  |
| United States E                                 | sankruptcy Court for the: | Northern    | District of Illinois (State) |         |  |  |  |
| Case number<br>(lf known)                       |                           |             | (Glale)                      |         |  |  |  |

#### Official Form 106G

#### Check if this is an amended filing

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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|                     |   | D0   | cument rage                       | JC 32 01 03  |
|---------------------|---|--|-----------------------------------|--|
| Fill in this infor  | rmation to identify your ca                   | ase:   |                                   |  |
| Debtor 1            | Kenneth                                       |  | Parker                            |  |
| Debtor 2            | First Name                                    | Middle Name  | Last Name                         |  |
| (Spouse, if filing) | First Name                                    | Middle Name  | Last Name                         |  |
| United States B     | Bankruptcy Court for the:                     | Northern   | District of Illinois              |  |
| Case number         |   |  | (State)                           |  |
| (If known)          |   |  |                                   | <u>_</u>   |
|                     |   |  |                                   | Check if this is ar amended filing   |
| Official            | Form 106H                                     |  |                                   |  |
|                     |   |  |                                   |  |
| Schedul             | e H: Your Cod                                 | ebtors   |                                   | 12/15  |
| •                   | er every question.  ave any codebtors? (If yo | u are filing a joint case, do                          | not list either spouse as a       | s a codebtor.)   |
| Idaho, Lo           | uisiana, Nevada, New Mex                      | lived in a community pro<br>ico, Puerto Rico, Texas, W |                                   | y? (Community property states and territories include Arizona, California, sin.) |
|                     | Go to line 3.                                 |  | La al Para de Maria de la Calenda | K2   |
|                     | . Dia your spouse, forme<br>No                | r spouse, or legal equiva                              | ient live with you at the t       | e ume ?  |
|                     |   | y state or territory did you                           | ı live?                           | Fill in the name and current address of that person.                             |
|                     | Name of your spouse, for                      | ormer spouse, or legal equ                             | ivalent                           |  |
|                     | Number Street                                 |  |                                   |  |
|                     | City  | State  | Zip Coo                           | code   |
| 2 In Column         | a 1 liet ell efveur sadab                     | toro. Do not include vev                               | r anguag ag a gadabbar :          | r if your spause is filing with you. List the person shown in line 2             |

again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

Official Form 106H Schedule H: Your Codebtors page 1

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| Fill in this informatio                                  | n to identify y                               | our case:   |                       |         |                     |           |   |
|--|---|---|-----------------------|---------|---------------------|-----------|---|
| Debtor 1 Kennet  |   |   | Parke                 | ar.     |                     |           |   |
| First Na   |   | Middle Name   | Last N                |         |                     | Chor      | ck if this is:  |
| Debtor 2   |   |   |                       |         |                     |           |   |
| (Spouse, if filing) First Na                             | ime   | Middle Name   | Last N                | Name    |                     |           | An amended filing   |
| United States Bankrup                                    | tcy Court for                                 | Northern  | District of II        |         |                     |           | A supplement showing post-petition chap<br>expenses as of the following date:                                 |
| the:<br>Case number                                      |   |   | (8                    | State)  |                     | Ü         | mportion as of the following date.  |
| (If known)   |   |   |                       |         |                     | N         | MM / DD / YYYY  |
| Official Form  | 106I  |   |                       |         | <u>.</u>            |           |   |
| Schedule I: `  |   | come  |                       |         |                     |           |   |
| information about yo                                     | ur spouse. If<br>e is needed,<br>inswer every | you are separated and attach a separate she question.   | d your spou           | se is n | ot filing with yo   | ou, do r  | spouse is living with you, include<br>not include information about your<br>onal pages, write your name and c |
| 1 Fill in your amploy                                    | mont  |   | Debtor <sup>-</sup>   | 1       |                     |           | Debtor 2  |
| <ol> <li>Fill in your employ<br/>information.</li> </ol> | ment  |   |                       |         |                     |           |   |
| If you have more th                                      | an one job,                                   | Employment status                                       | Emplo                 | oyed    |                     |           | Employed  |
| attach a separate pa                                     | ge with                                       |   | ✓ Not E               | mployed | i                   |           | Not Employed  |
| information about a employers.                           | aditional                                     | Occupation  |                       |         |                     |           |   |
| Include part time, se                                    | asonal. or                                    | Employer's name   |                       |         |                     |           |   |
| self-employed work                                       |   | • •   |                       |         |                     |           |   |
| Occupation may income or homemaker, if it a              |   | Employer's address                                      | Number St             | reet    |                     |           | Number Street   |
|  |   |   |                       |         |                     |           |   |
|  |   |   | City                  |         | State Zip (         | Code      | City State Zip Code   |
|  |   | How long employed there?                                |                       |         |                     |           |   |
| Part 2: Give Deta  | ils About M                                   | onthly Income   |                       |         |                     |           |   |
|  |   | ne date you file this forn                              | <b>n.</b> If you have | nothing | g to report for an  | y line, w | rite \$0 in the space. Include your non-fil   |
|  | g spouse have                                 |   | combine the           | informa | ation for all emplo | yers for  | that person on the lines below. If you n  |
| more space, attach a                                     | separate shee                                 | t to this form.   |                       |         | For Debtor 1        |           | For Debtor 2 or non-filing spouse   |
|  |   | ry, and commissions (befo<br>calculate what the monthly |                       | 2.      | \$                  | 0.00      |   |
| 3. Estimate and list                                     | monthly overt                                 | ime pay.  |                       | 3       | + \$                | 0.00      |   |
| 4. Calculate gross                                       | income. Add lin                               | e 2 + line 3.   |                       | 4.      |                     | 0.00      |   |

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| Debtor 1Kenneth  | Parker                      | Case number                | (if                               |                         |
|--|-----------------------------|----------------------------|-----------------------------------|-------------------------|
| First Name Middle Name   | Last Name                   | known) For Debtor 1        | For Debtor 2 or non-filing spouse |                         |
| Copy line 4 here   | <b>→</b> 4.                 | \$0.00                     |                                   |                         |
| 5. List all payroll deductions:  |                             |                            |                                   |                         |
| 5a. Tax, Medicare, and Social Security deductions  | 5a.                         | \$0.00                     |                                   |                         |
| 5b. Mandatory contributions for retirement plans   | 5b.                         | \$0.00                     |                                   |                         |
| 5c. Voluntary contributions for retirement plans   | 5c.                         | \$0.00                     |                                   |                         |
| 5d. Required repayments of retirement fund loans   | 5d.                         | \$0.00                     |                                   |                         |
| 5e. Insurance  | 5e.                         | \$0.00                     |                                   |                         |
| 5f. Domestic support obligations   | 5f.                         | \$0.00                     |                                   |                         |
| 5g. <b>Union dues</b>  | 5g.                         | \$0.00                     |                                   |                         |
| 5h. Other deductions. Specify:   | 5h. +                       | \$0.00 +                   |                                   |                         |
| 6. Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + +5h$ .  | 5f + 5g 6.                  | \$0.00                     |                                   |                         |
| 7. Calculate total monthly take-home pay. Subtract line 6 from lin   | ne 4. 7.                    | \$0.00                     |                                   |                         |
| 8. List all other income regularly received:   |                             |                            |                                   |                         |
| 8a. Net income from rental property and from operating a<br>business, profession, or farm Attach a statement for each property and business showing  |                             |                            |                                   |                         |
| gross receipts, ordinary and necessary business expenses, ar the total monthly net income.   | 1d<br>8a.                   | \$0.00                     |                                   |                         |
| 8b. Interest and dividends   | 8b.                         | \$0.00                     |                                   |                         |
| 8c. Family support payments that you, a non-filing spouse, o dependent regularly receive   |                             |                            |                                   |                         |
| Include alimony, spousal support, child support, maintenanc divorce settlement, and property settlement.   | 8c.                         | \$0.00                     |                                   |                         |
| 8d. Unemployment compensation  | 8d.                         | \$0.00                     |                                   |                         |
| 8e. Social Security  | 8e.                         | \$1,002.00                 |                                   |                         |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benef under the Supplemental Nutrition Assistance Program) or housing subsidies Specify:   |                             | <b>\$0.00</b>              |                                   |                         |
| On Panaian as satisament income  | 8f.                         | \$0.00                     |                                   |                         |
| 8g. Pension or retirement income   | 8g.                         | \$0.00<br>\$0.00 +         |                                   |                         |
| 8h. Other monthly income. Specify:   | 8h. +<br>ı + 8h.         9. |                            |                                   |                         |
| 5. Add all other income Add lines oa + ob + oc + od + oe + or +og  | ] + 611. 9.                 | \$1,002.00                 |                                   |                         |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing  | 10.<br>spouse               | \$1,002.00 +               | =                                 | \$1,002.00              |
| 11. State all other regular contributions to the expenses that y Include contributions from an unmarried partner, members of you friends or relatives. Do not include any amounts already included in lines 2-10 or am   | ur household, your d        | dependents, your roomm     |                                   |                         |
| Specify:   | ounts that are not a        | randole to pay expenses if | 11. +                             | \$0.00                  |
| opeony.  |                             |                            |                                   | Ψ0.00                   |
| 12. Add the amount in the last column of line 10 to the amount Write that amount on the Summary of Schedules and Statistical S |                             |                            | ,                                 | \$1,002.00              |
|  |                             |                            |                                   | Combined monthly income |
| 13. Do you expect an increase or decrease within the year afte   | r you file this form        | ?                          |                                   |                         |
| No.  |                             |                            |                                   |                         |
| Yes. Explain:  |                             |                            |                                   |                         |
|  |                             |                            |                                   |                         |

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|   |  | Docu   | ment Page 35 of 69  | )                                   |  |
|---|--|--|---|-------------------------------------|--|
| Fill in this infor  | mation to identify your  | case:  |   |                                     |  |
| Debtor 1  | Kenneth<br>First Name  | Middle Name  | Parker<br>Last Name   |                                     |  |
| Debtor 2<br>(Spouse, if filing)                                 | First Name   | Middle Name  | Last Name   | Check if this is:  An amended filin | ng   |
|   | ankruptcy Court for the  |  | District of Illinois  |                                     | nowing post-petition chapter 13 he following date: |
| Case number   |  |  | (State)   | MM / DD / YYYY                      |  |
|   | Form 106J  |  |   |                                     |  |
| Schedule  | e J: Your Exp  | penses   |   |                                     | 12/15  |
| (if known). Answer Part 1: Description 1. Is this a join No. Go | wer every question.  cribe Your Househout case?  to line 2  pes Debtor 2 live in a service of the control of th | old<br>separate household?                               | nses for Separate Household of Debases  Dependent's relationship to  Debtor 1 or Debtor 2 |                                     | Does dependent live with you?                      |
|   | d your   | No<br>Yes  |   |                                     |  |
| Part 2: Estir   | nate Your Ongoing  | Monthly Expenses   |   |                                     |  |
| Estimate your   | expenses as of your b  | pankruptcy filing date unless y                          | rou are using this form as a suppl<br>plemental Schedule J, check the                     | •                                   | •  |
|   |  | cash government assistance it on Schedule I: Your Income |   |                                     | Your expenses                                      |
|   | or home ownership e  | xpenses for your residence. In                           | clude first mortgage payments and   |                                     | \$200.00   |
| •   | uded in line 4:  |  |   |                                     |  |

\$0.00

\$0.00

\$0.00

\$0.00

4a

4b.

4c.

4d.

4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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 Debtor 1 First Name
 Kenneth First Name
 Parker Last Name
 Case number (if known)

| 5. Additional mortgage payments for your residence, such as home equity loans         5.         \$0.00           6. Utilities         5.         \$0.00           6. Utilities         6.         \$100.00           68. Electricity, healt, natural gas         6a.         \$100.00           60. Valur, sevur, gurbage collection         6b.         \$0.00           61. Cliphone, cell phone, internet, sabellila, and cable services         6c.         \$30.00           61. Cliphone, cell phone, internet, sabellila, and cable services         6d.         \$30.00           7. Food and housekeeping supplies         7.         \$195.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$17.00           10. Personal care products and services         11.         \$0.00           11. Medical and dental expenses         11.         \$0.00           12. Transportation, include gas, maintenance, bus or train fave.         \$0.00           13. Electratiment, clubs, recreation, newspapers, magazines, and books         14.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Installiment or lease payments         15a         \$0.00           16. Charitable insurance         <  | riistivaille                         | Middle Name Last Name   |     |               |
|--|--------------------------------------|---|-----|---------------|
| 6. Utilities:         6.8. \$100.00           6. B. Wilst, sewer, garbage collection         6b. \$30.00           6b. Wilst, sewer, garbage collection         6c. \$30.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c. \$30.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6d. \$30.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6d. \$30.00           7. Food and housekeeping supplies         8. \$0.00           8. Childcare and children's education costs         8. \$0.00           9. Clothing, laundry, and dry cleaning         9. \$17.00           10. Personal care products and services         11. \$0.00           11. Medical and dental expenses         11. \$0.00           12. Transportation, Include gas, maintenance, bus or train fare.         12. \$100.00           Do not include ear payments         12. \$100.00           14. Charitable contributions and religious donations         13. \$0.00           15. Intertainment, clubs, recreation, newspapers, magazines, and books         13. \$0.00           15. Invariance.         15a. \$0.00           15. Intertainment, clubs, recreation, newspapers, magazines, and books         13. \$0.00           15. Intertainment, clubs, recreation, personal care reducted from your pay or included in lines 4 or 20.         15a. \$0.00   |                                      |   |     | Your expenses |
| 68. Electricity, heat, natural gas         6a.         \$100.00           60. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, call phone, Internet, satellite, and cable services         6c.         \$30.00           6d. Other, Specity:         6d.         \$0.00           7. Food and housekeeping supplies         7.         \$195.00           8. Childcare and children's education costs         8.         \$0.00           8. Childcare and children's education services         10.         \$15.00           10. Personal care products and services         11.         \$0.00           11. Medical and dental expenses         11.         \$0.00           12. Transportation, Include gas, maintenance, bus or train fare.         12.         \$100.00           10. Include car payments         12.         \$0.00           14. Charitable contributions and religious donations         13.         \$0.00           15. Insurance.         15.         \$0.00           15b. Health insurance         15a         \$0.00           15c. Life insurance         15a         \$0.00           15c. Vehicle insurance. Specify:         15a         \$0.00           15c. Transpayments         15a         \$0.00           15c. Life insurance. Specify:         16  | 5. Additional mortgage payments      | for your residence, such as home equity loans                           | 5.  | \$0.00        |
| 6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephonne, cell phone, Internet, satellite, and cable services         6c.         \$30.00           6d. Other, Specify;         7c.         \$195.00           7c. Food and housekeeping supplies         7c.         \$195.00           8c. Childcare and children's education costs         8c.         \$0.00           9c. Clothing, Isuandry, and dry cleaning         9c.         \$17.00           10. Personal care products and services         11c.         \$0.00           11. Medical and dental expenses         11c.         \$0.00           12. Transportation. Include gas, maintenance, bus or train fare.         12c.         \$10.00           10. not include acre previous.         13.         \$0.00           14. Charitable contributions and religious donations         13.         \$0.00           15. Insurance.         15c.         \$0.00           15a. Lie insurance deducted from your pay or included in lines 4 or 20.         \$0.00         \$0.00           15c. Vehicle insurance         15c.         \$10.00           15c. Vehicle insurance         15c.         \$0.00           15c. Vehicle insurance.         \$15c.         \$0.00           15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. <t< td=""><td>6. Utilities:</td><td></td><td></td><td></td></t<>   | 6. Utilities:                        |   |     |               |
| 6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$30.00           6c. Other, Specify:         6d         \$0.00           7. Food and housekeeping supplies         7.         \$195.00           8. Childcare and children's education costs         8.         \$50.00           9. Clothing, laundry, and dry cleaning         9.         \$17.00           10. Personal care products and services         10.         \$15.00           11. Medical and dental expenses         11.         \$0.00           12. Transportation. Include gas, maintenance, bus or train fare. Do not include ear payments         13.         \$0.00           15. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           15. Instrainment, clubs, recreation, prevayers, magazines, and books         15.         \$0.00           15. Instrainment, clubs, recreation, prevayers, magazines, and books         15.         \$0.00           15. Instrainment, clubs, recreation, prevayers, magazines, and books         15.         \$0.00           15. Leath insurance         15.         \$0.00           15. Leath insu  | 6a. Electricity, heat, natural gas   |   | 6a. | \$100.00      |
| 6d. Other. Specify   | 6b. Water, sewer, garbage collection | on  | 6b. | \$0.00        |
| 7. Food and housekeeping supplies       7.       \$195.00         8. Childcare and children's education costs       8.       \$0.00         9. Clothing, laundry, and dry cleaning       9.       \$17.00         10. Personal care products and services       10.       \$15.00         11. Medical and dental expenses       11.       \$0.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include ace payments       13.       \$0.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       15.       \$0.00         15. Insurance.       15a       \$0.00         15b. Insurance       15a       \$0.00         15c. Vehicle insurance deducted from your pay or included in lines 4 or 20.       \$0.00       \$0.00         15c. Vehicle insurance. Specify:       15a       \$0.00         15c. Vehicle insurance. Specify:  | 6c. Telephone, cell phone, Interne   | t, satellite, and cable services  | 6c. | \$30.00       |
| 7. Food and housekeeping supplies       7.       \$195.00         8. Childcare and children's education costs       8.       \$0.00         9. Clothing, laundry, and dry cleaning       9.       \$17.00         10. Personal care products and services       10.       \$15.00         11. Medical and dental expenses       11.       \$0.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include ace payments       13.       \$0.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       15.       \$0.00         15. Insurance.       15a       \$0.00         15b. Insurance       15a       \$0.00         15c. Vehicle insurance deducted from your pay or included in lines 4 or 20.       \$0.00       \$0.00         15c. Vehicle insurance. Specify:       15a       \$0.00         15c. Vehicle insurance. Specify:  | 6d. Other. Specify:                  |   | 6d  | \$0.00        |
| 9. Clothing, laundry, and dry cleaning         9.         \$17.00           10. Personal care products and services         10.         \$15.00           11. Medical and dental expenses         11.         \$0.00           12. Transportation, Include gas, maintenance, bus or train fare.         12.         \$100.00           10. Include car payments         13.         \$0.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           15. Insurance.         15.         \$0.00           15. Insurance.         155.         \$0.00           15a. Life insurance deducted from your pay or included in lines 4 or 20.         156.         \$0.00           15c. Vehicle insurance         156         \$0.00           15c. Vehicle insurance. Specify:         156         \$0.00           15c. Vehicle insurance. Specify:         156         \$0.00           15c. Vehicle insurance.         156         \$0.00   |                                      |   | 7.  | \$195.00      |
| 10. Personal care products and services       10.       \$15.00         11. Medical and dental expenses       11.       \$0.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12.       \$10.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance.       15a       \$0.00         15b. Health insurance deducted from your pay or included in lines 4 or 20.       15a       \$0.00         15c. Vehicle insurance       15a       \$0.00         15c. Vehicle insurance.       15c       \$170.00         15c. Vehicle insurance. Specify:       15c       \$0.00         15d. Other insurance. Specify:       15c       \$0.00         15c. Vehicle insurance.       15c       \$0.00         15c. Vehicle insurance.       15c       \$0.00         15c. Vehicle insurance.       15c       \$0.00  | 8. Childcare and children's educat   | ion costs   | 8.  | \$0.00        |
| 11. Medical and dental expenses       11.       \$0.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12.       \$10.00         12. Intertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance.       15a. Life insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a. \$0.00         15b. Health insurance       15b. Health insurance       15c. Vehicle insurance       15c. \$170.00         15c. Vehicle insurance. Specify:       15d. \$0.00       \$0.00         15. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         \$pecify:       15d. \$0.00       \$0.00         17. Installment or lease payments:       17a. \$0.00         17c. Other. Specify:       17a. \$0.00         17c. Other. Specify:       17a. \$0.00         17c. Other. Specify:       17a. \$0.00         18. Your payments for Vehicle 2       17b. \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i).       18.         19. Other payments you make to support others who do not live with you.       \$0.00   | 9. Clothing, laundry, and dry clean  | ing   | 9.  | \$17.00       |
| 12.   Transportation. Include gas, maintenance, bus or train fare. Do not include car payments   12.   \$100.00     13.   Entertainment, clubs, recreation, newspapers, magazines, and books   13.   \$0.00     14.   Charitable contributions and religious donations   14.   \$0.00     15.   Insurance.   | 10. Personal care products and se    | rvices  | 10. | \$15.00       |
| Do not include car payments   13. Entertainment, clubs, recreation, newspapers, magazines, and books   13. \$0.00     14. Charitable contributions and religious donations   14. \$0.00     15. Insurance.   | 11. Medical and dental expenses      |   | 11. | \$0.00        |
| 14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance.       50.00       50.00         15a. Life insurance       15a       \$0.00         15b. Health insurance       15b       \$0.00         15c. Vehicle insurance       15c       \$170.00         15c. Vehicle insurance. Specify:       15d       \$0.00         15d. Other insurance. Specify:       15d       \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00       \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00       \$0.00         17. Installment or lease payments.       16       \$0.00         17. Lost payments for Vehicle 2       17a       \$0.00         17b. Car payments for Vehicle 2       17b       \$0.00         17c. Other. Specify:       17c       \$0.00         17c. Other. Specify:       17c       \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106l).       18.         19. Other payments you make to support others who do not live with you.       \$0.00         Specify:       20       \$0.00         200. Mortgages on other property   |                                      | intenance, bus or train fare.   | 12. | \$100.00      |
| 15. Insurance.   | 13. Entertainment, clubs, recreation | on, newspapers, magazines, and books                                    | 13. | \$0.00        |
| Do not include insurance deducted from your pay or included in lines 4 or 20.   15a. Life insurance   15a   \$0.00     15b. Health insurance   15b   \$0.00     15c. Vehicle insurance   15c   \$170.00     15c. Vehicle insurance. Specify:   | 14. Charitable contributions and re  | eligious donations  | 14. | \$0.00        |
| 15b. Health insurance   15b   \$0.00   15c. Vehicle insurance   15c   \$170.00   15c. Vehicle insurance   15c   \$170.00   15d. Other insurance. Specify:  |                                      | d from your pay or included in lines 4 or 20.                           |     |               |
| 15c. Vehicle insurance   15c   \$170.00   15d. Other insurance. Specify:   15d   \$0.00   15d. Other insurance. Specify:   15d   \$0.00   15d. Other insurance. Specify:   15d   \$0.00   15d. Other insurance. Specify:   16   \$0.00   16d.   \$0.00   \$0.00   \$0.00   16d.   \$0.00   \$0.00   16d.   \$0.00   \$0.00   16d.   \$0.00   \$0. | 15a. Life insurance                  |   | 15a | \$0.00        |
| 15d. Other insurance. Specify:   | 15b. Health insurance                |   | 15b | \$0.00        |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         Specify:   | 15c. Vehicle insurance               |   | 15c | \$170.00      |
| Specify:   | 15d. Other insurance. Specify:       |   | 15d | \$0.00        |
| 17. Installment or lease payments:       30.00         17a. Car payments for Vehicle 1       17a       \$0.00         17b. Car payments for Vehicle 2       17b       \$0.00         17c. Other. Specify:       17c       \$0.00         17d. Other. Specify:       17d       \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       19.       \$0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a       \$0.00         20b. Real estate taxes.       20b       \$0.00         20c. Property, homeowner's, or renter's insurance       20c       \$0.00         20d. Maintenance, repair, and upkeep expenses.       20d       \$0.00   | 16. Taxes. Do not include taxes dedu | cted from your pay or included in lines 4 or 20.                        |     |               |
| 17. Installment or lease payments:       17a. \$0.00         17a. Car payments for Vehicle 1       17a. \$0.00         17b. Car payments for Vehicle 2       17b. \$0.00         17c. Other. Specify:       17c. \$0.00         17d. Other. Specify:       17d. \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       19. \$0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a. \$0.00         20a. Mortgages on other property       20a. \$0.00         20b. Real estate taxes.       20b. \$0.00         20c. Property, homeowner's, or renter's insurance       20c. \$0.00         20d. Maintenance, repair, and upkeep expenses.       20d. \$0.00  | Specify:                             |   | 16  | \$0.00        |
| 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. So.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18.  19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00  | 17. Installment or lease payments:   |   | 10  |               |
| 17c. Other. Specify:   | 17a. Car payments for Vehicle 1      |   | 17a | \$0.00        |
| 17d. Other. Specify:   | 17b. Car payments for Vehicle 2      |   | 17b | \$0.00        |
| 17d. Other. Specify:   | 17c. Other. Specify:                 |   | 17c | \$0.00        |
| your pay on line 5, Schedule I, Your Income (Official Form 106I).  19.Other payments you make to support others who do not live with you.  Specify:  20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. So.00  20b. Real estate taxes.  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  | 17-1 Other Conseif                   |   | 17d | \$0.00        |
| 19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a \$0.00  20b. Real estate taxes.  20b \$0.00  20c. Property, homeowner's, or renter's insurance  20c \$0.00  20d. Maintenance, repair, and upkeep expenses.  20d \$0.00   |                                      |   | 10  | \$0.00        |
| Specify:   |                                      |   | 18. |               |
| 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00   |                                      | pport others who do not live with you.                                  | 19  | \$0.00        |
| 20b. Real estate taxes.  20b. Real estate taxes.  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00   | 20.Other real property expenses n    | ot included in lines 4 or 5 of this form or on Schedule I: Your Income. |     |               |
| 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00   | , , , ,                              |   | 20a | \$0.00        |
| 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00   | 20b. Real estate taxes.              |   | 20b | \$0.00        |
| 20d. Maintenance, repair, and upkeep expenses. 20d <b>\$0.00</b>   | 20c. Property, homeowner's, or re    | enter's insurance   | 20c | \$0.00        |
| 20e. Homeowner's association or condominium dues 20e \$0.00  | 20d. Maintenance, repair, and upl    | eep expenses.   | 20d |               |
|  | 20e. Homeowner's association or      | condominium dues  | 20e | \$0.00        |

Official Form 106J Schedule J: Your Expenses page 2

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| 21. Other. Specify:  22. Calculate your monthly expenses.  22a. Add lines 4 through 21.  22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  22c. Add line 22a and 22b. The result is your monthly expenses.  23c. Calculate your monthly net income.  23a. Copy line 12 (your combined monthly income) from Schedule I.  23a. Copy line 12 (your combined monthly income) from Schedule I.  23a. Copy line 12 (your combined monthly income) from Schedule I.  23b. Copy your monthly expenses from your monthly income.  The result is your monthly expenses from your monthly income.  The result is your monthly net income.  24. Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your montgage payment to increase or decrease because of a modification to the terms of your mortgage?  No  Yes  Explain here:  Debtor is living in Mother's home. Home has reverse mortgage and Debtor will need to find a new place. Anticipated rent is listed. | Debtor 1        | Kenneth  |                                  | Parker                       | Case number (if known) |                    |            |
|---|-----------------|--|----------------------------------|------------------------------|------------------------|--------------------|------------|
| 22. Calculate your monthly expenses.  22a. Add lines 4 through 21.  22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  22c. Add line 22a and 22b. The result is your monthly expenses.  23. Calculate your monthly net income.  23a. Copy line 12 (your combined monthly income) from Schedule I.  23b. Copy your monthly expenses from line 22 above.  23b. Copy your monthly expenses from line 22 above.  23c. Subtract your monthly expenses from your monthly income.  The result is your monthly net income.  23c. Subtract your monthly expenses from your monthly income.  The result is your monthly net income.  23c.  24. Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No  Yes  Explain here:  Debtor is living in Mother's home. Home has reverse mortgage and Debtor will need to find a new place. Anticipated rent is         |                 | First Name   | Middle Name                      | Last Name                    |                        |                    |            |
| 22a. Add lines 4 through 21.  22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  22c. Add line 22a and 22b. The result is your monthly expenses.  23. Calculate your monthly net income.  23a. Copy line 12 (your combined monthly income) from Schedule I.  23a. Copy your monthly expenses from line 22 above.  23b. Copy your monthly expenses from your monthly income.  The result is your monthly net income.  24. Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No  Explain here:  Debtor is living in Mother's home. Home has reverse mortgage and Debtor will need to find a new place. Anticipated rent is  | 21. <b>Othe</b> | r. Specify:  |                                  |                              |                        | 21                 | \$0.00     |
| 22a. Add lines 4 through 21.  22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  22c. Add line 22a and 22b. The result is your monthly expenses.  23. Calculate your monthly net income.  23a. Copy line 12 (your combined monthly income) from Schedule I.  23a. Copy your monthly expenses from line 22 above.  23b. Copy your monthly expenses from your monthly income.  The result is your monthly net income.  24. Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No  Yes  Explain here:  Debtor is living in Mother's home. Home has reverse mortgage and Debtor will need to find a new place. Anticipated rent is   | 22. <b>Calc</b> | ulate your monthly   | expenses.                        |                              |                        |                    | \$827.00   |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  23. Calculate your monthly net income.  23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. Copy your monthly expenses from line 22 above. 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.  24. Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No  Yes  Explain here: Debtor is living in Mother's home. Home has reverse mortgage and Debtor will need to find a new place. Anticipated rent is  | 22a. A          | Add lines 4 through 2                                      | 21.                              |                              |                        |                    |            |
| 22c. Add line 22a and 22b. The result is your monthly expenses.  23. Calculate your monthly net income.  23a. Copy line 12 (your combined monthly income) from Schedule I.  23a. Copy your monthly expenses from line 22 above.  23b. Copy your monthly expenses from your monthly income.  The result is your monthly expenses from your monthly income.  The result is your monthly net income.  24. Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No  Yes  Explain here:  Debtor is living in Mother's home. Home has reverse mortgage and Debtor will need to find a new place. Anticipated rent is  | 22b. (          | Copy line 22 (month  | y expenses for Debtor 2), if any | , from Official Form 106J-2  |                        |                    |            |
| 23a. Copy line 12 (your combined monthly income) from Schedule I.  23a \$1,002.00 23b. Copy your monthly expenses from line 22 above.  23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.  24. Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No  Yes  Explain here: Debtor is living in Mother's home. Home has reverse mortgage and Debtor will need to find a new place. Anticipated rent is   | 22c. /          | Add line 22a and 22b                                       | . The result is your monthly exp | enses.                       |                        | 22.                |            |
| 23b. Copy your monthly expenses from line 22 above.  23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.  24. Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No  Yes  Explain here: Debtor is living in Mother's home. Home has reverse mortgage and Debtor will need to find a new place. Anticipated rent is   | 23.Calcu        | ulate your monthly i                                       | net income.                      |                              |                        |                    |            |
| 23c. Subtract your monthly expenses from your monthly income.  The result is your monthly net income.  23c  24. Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No  Yes  Explain here:  Debtor is living in Mother's home. Home has reverse mortgage and Debtor will need to find a new place. Anticipated rent is   | 23a. (          | Copy line 12 (your co                                      | mbined monthly income) from      | Schedule I.                  |                        | 23a                | \$1,002.00 |
| The result is your monthly net income.  23c  24. Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No  Yes  Explain here:  Debtor is living in Mother's home. Home has reverse mortgage and Debtor will need to find a new place. Anticipated rent is  | 23b. (          | Copy your monthly e  | xpenses from line 22 above.      |                              |                        | 23b                | \$827.00   |
| The result is your monthly net income.  23c  24. Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No  Yes  Explain here:  Debtor is living in Mother's home. Home has reverse mortgage and Debtor will need to find a new place. Anticipated rent is  | 23c. 8          | Subtract your monthl                                       | y expenses from your monthly i   | ncome.                       |                        |                    | \$175.00   |
| For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No  Yes  Explain here:  Debtor is living in Mother's home. Home has reverse mortgage and Debtor will need to find a new place. Anticipated rent is   |                 | The result is your mo                                      | inthly net income.               |                              |                        | 23c                | <u> </u>   |
|   | mort            | tgage payment to income  Yes  Explain here  Debtor is line | rease or decrease because of a r | modification to the terms of | f your mortgage?       | nticipated rent is |            |

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|                     | mation to identify your c |             |                      |
|---------------------|---------------------------|-------------|----------------------|
| Debtor 1            | Kenneth                   |             | Parker               |
|                     | First Name                | Middle Name | Last Name            |
| Debtor 2            |                           |             |                      |
| (Spouse, if filing) | First Name                | Middle Name | Last Name            |
| United States E     | Bankruptcy Court for the: | Northern    | District of Illinois |
|                     |                           |             | (State)              |
| Case number         |                           |             |                      |
| (If known)          | ·                         | •           | •                    |

#### Official Form 106Dec

U.S.C. §§ 152, 1341, 1519, and 3571.

### Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

If two married people are filing together, both are equally responsible for supplying correct information.

12/15

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18

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| Fill in this infor              | mation to identify your   | case:       |                              |  |
|---------------------------------|---------------------------|-------------|------------------------------|--|
| Debtor 1                        | Kenneth                   |             | Parker                       |  |
| D. I                            | First Name                | Middle Name | Last Name                    | Check if this is:  |
| Debtor 2<br>(Spouse, if filing) | First Name                | Middle Name | Last Name                    | An amended filing  |
| United States E                 | Bankruptcy Court for the: | Northern    | District of Illinois (State) | A supplement showing post-petition of expenses as of the following date: |
| Case number<br>(If known)       |                           |             | ()                           |  |

#### Official Form 106J-2

#### Schedule J-2: Expenses for Separate Household of Debtor 2

12/15

Use this form for Debtor's separate household expenses ONLY IF Debtor 1 and Debtor 2 maintain separate households. If Debtor 1 and Debtor 2 have one or more dependents in common, list the dependents on both Schedule J and this form. Answer the questions on this form only with respect to expenses for Debtor 2 that are not reported on Schedule J. Be as complete and accurate as possible. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1:  | Describe Your Household                    |
|----------|--|
| 1.Do you | and Debtor 1 maintain separate households? |
| □ N      | o. Do not complete this form.              |
| ☐ Y      | es.  |

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|                    | nis inforr   | mation to identify your o   | case:                  |   |  |                          |          |   |
|--------------------|--------------|-----------------------------|------------------------|---|--|--------------------------|----------|---|
| Debtor             |              | Kenneth                     |                        | Parker  |  |                          |          |   |
|                    |              | First Name                  | Middle Na              |   | е  |                          |          |   |
| Debtor<br>(Spouse, |              | First Name                  | Middle Na              | ame Last Nam  | e  |                          |          |   |
| United             | States B     | Sankruptcy Court for the:   | Northern               | District of Illino                                    | is   |                          |          |   |
| Case nu            | umber        |                             |                        | (State  | e)   |                          |          |   |
| (If known)         |              |                             |                        |   |  |                          |          | Check if this is  |
| Offic              | cial         | Form 107                    |                        |   |  |                          |          | amended filing  |
| State              | emei         | nt of Financia              | al Affairs fo          | r Individuals   | Filina for   | Bankru                   | ntcv     | 12/ <sup>-</sup>  |
| informa            | ation. If    |                             | ed, attach a separ     | rried people are filing trate sheet to this form      |  |                          |          |   |
| Part 1:            | Give         | Details About Your          | Marital Status a       | and Where You Lived                                   | Before   |                          |          |   |
| 1. V               | Vhat is      | your current marital st     | atus?                  |   |  |                          |          |   |
| Г                  | ☐ Mar        | ried                        |                        |   |  |                          |          |   |
| Ē                  | Not          | married                     |                        |   |  |                          |          |   |
| 2. 🖸               | ouring tl    | he last 3 years, have yo    | ou lived anywhere      | other than where you liv                              | ve now?  |                          |          |   |
|                    |              |                             |                        |   |  |                          |          |   |
| Γ.                 | <b>刁</b> No  |                             |                        |   |  |                          |          |   |
| [·<br>[            | ✓ No<br>Yes. | . List all of the places yo | ou lived in the last 3 | 3 years. Do not include v                             | vhere you live no                                    | W.                       |          |   |
| [.<br>[            |              | . List all of the places yo | ou lived in the last 3 | 3 years. Do not include v                             | vhere you live no                                    | w.                       |          |   |
| [                  | Yes          | . List all of the places yo | ou lived in the last 3 | 3 years. Do not include v  Dates Debtor 1 lived there | vhere you live no                                    | W.                       |          | Dates Debtor 2 lived there                                    |
| [                  | Yes          |                             | ou lived in the last 3 | Dates Debtor 1 lived                                  |  |                          |          |   |
| [·<br>[            | Yes          |                             | ou lived in the last 3 | Dates Debtor 1 lived there                            | Debtor 2:  |                          |          | Same as Debtor 1  |
| [                  | Yes          |                             | ou lived in the last 3 | Dates Debtor 1 lived there                            | Debtor 2:  | Debtor 1                 |          | Same as Debtor 1  From  |
| [:                 | Yes          | otor 1:                     | ou lived in the last 3 | Dates Debtor 1 lived there                            | Debtor 2:  | Debtor 1                 |          | Same as Debtor 1  |
| [                  | Yes          | nber Street                 | ou lived in the last 3 | Dates Debtor 1 lived there                            | Debtor 2:  | Debtor 1                 | Zip Code | Same as Debtor 1  From  |
| [:                 | Yes.  Deb    | nber Street                 |                        | Dates Debtor 1 lived there                            | Debtor 2:  Same as I  Number Street                  | Debtor 1 State           | Zip Code | Same as Debtor 1  From  |
| [:                 | Yes.  Deb    | nber Street State           |                        | Dates Debtor 1 lived there  From To                   | Debtor 2:  Same as I  Number Street  City  Same as I | Debtor 1  State Debtor 1 | Zip Code | there  Same as Debtor 1  From To  Same as Debtor 1            |
| [                  | Yes.  Deb    | nber Street                 |                        | Dates Debtor 1 lived there                            | Debtor 2:  Same as I  Number Street                  | Debtor 1  State Debtor 1 | Zip Code | there  Same as Debtor 1  From To                              |
| [:                 | Yes.  Deb    | nber Street State           |                        | Dates Debtor 1 lived there  From To                   | Debtor 2:  Same as I  Number Street  City  Same as I | Debtor 1  State Debtor 1 | Zip Code | there  Same as Debtor 1  From To  Same as Debtor 1  From From |

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Parker Debtor 1 Kenneth Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) Wages, Wages, From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, For last calendar year: commissions, commissions, 2015 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, For the calendar year before that: commissions. commissions. (January 1 to December 31, 2014) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions exclusions) and exclusions) Est. 2016 SSI \$11,022.00 From January 1 of current year until the date you filed for bankruptcy: Est. 2015 SSI \$12,024.00 For last calendar year: (January 1 to December 31, 2015 \$12,024.00 Est. 2014 SSI For the calendar year before that: (January 1 to December 31, 2014

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Parker Debtor 1 Kenneth \_\_ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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| Insider's Name   | or 1                 | Kenneth   |                                     |  |  | arker   | Case number                                  | (if known)  |
|--|----------------------|---|-------------------------------------|--|--|---|--|---|
| insider's Name  Number Street    City   State   Zip Code   |                      | First Name  |                                     | Middle Name  | La:                                      | st Name                                       |  |   |
| Ves. List all payments to an insider.    Dates of payment   Total amount pount   Amount you still owe  | nsio<br>corp<br>ager | ders include your<br>orations of whicl<br>nt, including one | relatives; an you are a for a busin | iny general partner<br>in officer, director,<br>ness you operate a | s; relatives of any<br>person in control | general partners; par<br>, or owner of 20% or | tnerships of which y<br>more of their voting | ou are a general partner;<br>g securities; and any managing |
| Dates of payment Paid Amount you still owe  Insider's Name Number Street  City State Zip Code  Insider's Name Number Street  City State Zip Code  Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?  Include payments on debts guaranteed or cosigned by an insider.  No  Yes. List all payments that benefited an insider.  Dates of payment paid  Insider's Name  Number Street  City State Zip Code  Dates of payment paid  Total amount pour still owe Include creditor's name  Insider's Name  Number Street  City State Zip Code | <b>✓</b>             |   | manta ta 1                          | an incidor   |  |   |  |   |
| Number Street    City   State   Zip Code   | Ц                    | res. List ali pay   | ments to a                          | an insider.  |  |   |  | Reason for this payment                                     |
| City State Zip Code    Insider's Name   Number Street  |                      | Insider's Name  |                                     |  |  |   |  |   |
| Insider's Name Number Street  City State Zip Code  Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?  nclude payments on debts guaranteed or cosigned by an insider.  ✓ No  Yes. List all payments that benefited an insider.  Dates of payment paid Amount you still owe Include creditor's name  Insider's Name  Number Street  City State Zip Code  Insider's Name  |                      | Number Street   |                                     |  |  |   |  |   |
| Number Street  City State Zip Code  Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?  Include payments on debts guaranteed or cosigned by an insider.  No Yes. List all payments that benefited an insider.  Dates of payment Paid Total amount paid Still owe  Insider's Name  Number Street  City State Zip Code  Insider's Name  |                      | City  | State                               | Zip Code   |  |   |  |   |
| City State Zip Code  Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?  Include payments on debts guaranteed or cosigned by an insider.  No Yes. List all payments that benefited an insider.  Dates of payment paid Still owe Reason for this payment Include creditor's name  Insider's Name  Number Street  City State Zip Code   |                      | Insider's Name  |                                     |  |  |   |  |   |
| Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?  Include payments on debts guaranteed or cosigned by an insider.  No Yes. List all payments that benefited an insider.  Dates of payment  Dates of payment  Insider's Name  Number Street  City State Zip Code  Insider's Name   |                      | Number Street   |                                     |  |  |   |  |   |
| Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?  Include payments on debts guaranteed or cosigned by an insider.  No Yes. List all payments that benefited an insider.  Dates of payment Paid  Total amount you still owe  Insider's Name  Number Street  City State Zip Code  Insider's Name  |                      | City  | State                               | Zip Code   |  |   |  |   |
| Number Street  City State Zip Code  Insider's Name   | Inclu                | ide payments on<br>No                                       | _                                   | _  | sider.  Dates of                         |   | <del>-</del>                                 |   |
| City State Zip Code  Insider's Name  |                      | Insider's Name  |                                     |  |  |   |  |   |
| Insider's Name   |                      | Number Street   |                                     |  |  |   |  |   |
|  |                      | City  | State                               | Zip Code   |  |   |  |   |
| Number Street  |                      | Insider's Name  |                                     |  |  | <u> </u>                                      |  |   |
| Number Sueet   |                      | Number Street   |                                     |  |  |   |  |   |
| City State Zip Code  |                      | City  | State                               | Zip Code   |  |   |  |   |

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Debtor 1 Kenneth Parker Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No **V** Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | tor 1 Kenneth  | Parker                      | Case number (if known)                        |                       |
|------|--|-----------------------------|---|-----------------------|
|      | First Name Middle Name   | Last Name                   |   |                       |
| 11.  | Within 90 days before you filed for bankruptcy, did accounts or refuse to make a payment because you |                             | pank or financial institution, set off any am | ounts from your       |
|      | Yes. Fill in the details.  |                             |   |                       |
|      | Too. 1 iii ii i die detaile.   |                             |   |                       |
|      |  | Describe the action th      | e creditor took Date action was taken         | Amount                |
|      | Creditor's Name  |                             |   |                       |
|      | Number Street  |                             |   |                       |
|      |  | Last 4 digits of account    | number: XXXX-                                 |                       |
|      | City State Zip Code  |                             |   |                       |
| 12.  | Within 1 year before you filed for bankruptcy, was a   | ny of your property in the  | possession of an assignee for the benefit of  | f creditors, a court- |
|      | appointed receiver, a custodian, or another official   |                             |   | ,                     |
|      | No   |                             |   |                       |
|      | Yes  |                             |   |                       |
| Part | 5: List Certain Gifts and Contributions  |                             |   |                       |
| 13.  | Within 2 years before you filed for bankruptcy, did  | you give any gifts with a t | otal value of more than \$600 per person?     |                       |
|      | <b>✓</b> No  |                             |   |                       |
|      | Yes. Fill in the details for each gift.  |                             |   |                       |
|      | Gifts with a total value of more than \$600 per person   | Describe the gifts          | Dates you gave the gifts                      | Value                 |
|      |  |                             |   |                       |
|      | Person to Whom You Gave the Gift   |                             |   |                       |
|      | Number Street  |                             |   |                       |
|      |  |                             |   |                       |
|      | City State Zip Code  |                             |   |                       |
|      | Person's relationship to you   |                             |   |                       |
|      | Person to Whom You Gave the Gift   |                             |   | _                     |
|      |  |                             |   |                       |
|      | Number Street  |                             |   |                       |
|      | City State Zip Code  |                             |   |                       |
|      | Person's relationship to you   |                             |   |                       |

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|          | Kenneth   | Parker Case number (if kno   | wn)                                     |   |
|----------|---|--|---|---|
|          | First Name Middle Name  | Last Name  | ·                                       |   |
|          |   |  |   |   |
| Wit      | thin 2 years before you filed for bankruptcy, d   | lid you give any gifts or contributions with a total value   | of more than \$600                      | to any charity?                         |
| <b>✓</b> | l No  |  |   |   |
|          |   | P  |   |   |
|          | Yes. Fill in the details for each gift or contribu  | ution.   |   |   |
|          | Gifts or contributions to charities   | Describe what you contributed  | Date you                                | Value                                   |
|          | that total more than \$600  |  | contributed                             |   |
|          |   |  |   |   |
|          | Charity's Name  | _  |   |   |
|          | Offaity 3 Name  |  |   |   |
|          |   | _  |   |   |
|          | Number Street   |  |   |   |
|          | Number Street   |  |   |   |
|          | City State Zip Code   | _  |   |   |
|          | Only State Zip State  |  |   |   |
| t 6·     | List Certain Losses   |  |   |   |
|          |   |  |   |   |
| ✓        | No Yes. Fill in the details.  Describe the property you lost and  | Describe any insurance coverage for the loss   | Date of your                            | Value of property                       |
|          | how the loss occurred   | Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property.</i> | loss                                    | lost                                    |
|          | Pistol  | N/A  | 11/29/2016                              | \$375.00                                |
|          | 1 10101   | 1077   |   | *************************************** |
|          | List Certain Payments or Transfers  |  |   |   |
|          |   |  |   |   |
| <b>✓</b> | No  | , or credit counseling agencies for services required in your b  | запкирю.                                |   |
|          | Yes. Fill in the details.   | , or create courseling agencies for services required in your i  | Jankiupicy.                             |   |
|          |   |  |   | Amount of                               |
|          |   | Description and value of any property  | Date payment                            | Amount of                               |
|          |   |  |   | Amount of payment                       |
|          | Yes. Fill in the details.   | Description and value of any property transferred  | Date payment<br>or transfer<br>was made | payment                                 |
|          | Yes. Fill in the details.  Semrad Law Firm  | Description and value of any property  | Date payment or transfer                |   |
|          | Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid  | Description and value of any property transferred  | Date payment<br>or transfer<br>was made | payment                                 |
|          | Yes. Fill in the details.  Semrad Law Firm  | Description and value of any property transferred  | Date payment<br>or transfer<br>was made | payment                                 |
|          | Yes. Fill in the details.  Semrad Law Firm  Person Who Was Paid 11101 S. Western Avenue   | Description and value of any property transferred  | Date payment<br>or transfer<br>was made | payment                                 |
|          | Yes. Fill in the details.  Semrad Law Firm  Person Who Was Paid 11101 S. Western Avenue   | Description and value of any property transferred  | Date payment<br>or transfer<br>was made | payment                                 |
|          | Yes. Fill in the details.  Semrad Law Firm  Person Who Was Paid 11101 S. Western Avenue   | Description and value of any property transferred  | Date payment<br>or transfer<br>was made | payment                                 |
|          | Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  | Description and value of any property transferred  | Date payment<br>or transfer<br>was made | payment                                 |
|          | Yes. Fill in the details.  Semrad Law Firm  Person Who Was Paid 11101 S. Western Avenue  Number Street  Chicago Illinois 60643  City State Zip Code   | Description and value of any property transferred  | Date payment<br>or transfer<br>was made | payment                                 |
|          | Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643  | Description and value of any property transferred  | Date payment<br>or transfer<br>was made | payment                                 |
|          | Yes. Fill in the details.  Semrad Law Firm  Person Who Was Paid 11101 S. Western Avenue  Number Street  Chicago Illinois 60643  City State Zip Code  Email or website address   | Description and value of any property transferred  | Date payment<br>or transfer<br>was made | payment                                 |
|          | Yes. Fill in the details.  Semrad Law Firm  Person Who Was Paid 11101 S. Western Avenue  Number Street  Chicago Illinois 60643  City State Zip Code   | Description and value of any property transferred  | Date payment<br>or transfer<br>was made | payment                                 |
|          | Yes. Fill in the details.  Semrad Law Firm  Person Who Was Paid  11101 S. Western Avenue  Number Street  Chicago Illinois 60643  City State Zip Code  Email or website address  Person Who Made the Payment, if Not You                                 | Description and value of any property transferred  | Date payment<br>or transfer<br>was made | payment                                 |
|          | Yes. Fill in the details.  Semrad Law Firm  Person Who Was Paid 11101 S. Western Avenue  Number Street  Chicago Illinois 60643  City State Zip Code  Email or website address   | Description and value of any property transferred  | Date payment<br>or transfer<br>was made | payment                                 |
|          | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code  Email or website address  Person Who Made the Payment, if Not You  Person Who Was Paid   | Description and value of any property transferred  | Date payment<br>or transfer<br>was made | payment                                 |
|          | Yes. Fill in the details.  Semrad Law Firm  Person Who Was Paid  11101 S. Western Avenue  Number Street  Chicago Illinois 60643  City State Zip Code  Email or website address  Person Who Made the Payment, if Not You                                 | Description and value of any property transferred  | Date payment<br>or transfer<br>was made | payment                                 |
|          | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code  Email or website address  Person Who Made the Payment, if Not You  Person Who Was Paid   | Description and value of any property transferred  | Date payment<br>or transfer<br>was made | payment                                 |
|          | Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code  Email or website address  Person Who Made the Payment, if Not You  Person Who Was Paid  Number Street | Description and value of any property transferred  | Date payment<br>or transfer<br>was made | payment                                 |
|          | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code  Email or website address  Person Who Made the Payment, if Not You  Person Who Was Paid   | Description and value of any property transferred  | Date payment<br>or transfer<br>was made | payment                                 |
|          | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code  Email or website address  Person Who Made the Payment, if Not You  Person Who Was Paid  Number Street  City State Zip Code       | Description and value of any property transferred  | Date payment<br>or transfer<br>was made | payment                                 |
|          | Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code  Email or website address  Person Who Made the Payment, if Not You  Person Who Was Paid  Number Street | Description and value of any property transferred  | Date payment<br>or transfer<br>was made | payment                                 |
|          | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code  Email or website address  Person Who Made the Payment, if Not You  Person Who Was Paid  Number Street  City State Zip Code       | Description and value of any property transferred  | Date payment<br>or transfer<br>was made | payment                                 |

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| Debt |             | Kenneth  |  | Parker   | Case number (if known)    |                                   |                                |
|------|-------------|--|--|--|---------------------------|-----------------------------------|--------------------------------|
|      |             | First Name   | Middle Name  | Last Name  |                           |                                   |                                |
| 17.  | help        | hin 1 year before you filed<br>o you deal with your credit<br>not include any payment or | tors or to make payme                                |  | ur behalf pay or transfer | any property to any               | one who promised to            |
|      | <b>✓</b>    | No   |  |  |                           |                                   |                                |
|      |             | Yes. Fill in the details.  |  |  |                           |                                   |                                |
|      |             |  |  | Description and value of an transferred          | y property                | Date payment or transfer was made | Amount of payment              |
|      |             | Person Who Was Paid  |  |  |                           |                                   |                                |
|      |             | Number Street  |  |  |                           |                                   |                                |
|      |             | City State   | Zip Code   |  |                           |                                   |                                |
| 18.  | the<br>Incl | ordinary course of your bude both outright transfers a transfers that you have alreated. | usiness or financial aff<br>and transfers made as se | ecurity (such as the granting of a               |                           |                                   |                                |
|      | Ш           | Yes. Fill in the details.  |  |  |                           |                                   |                                |
|      |             |  |  | Description and value of an property transferred |                           | ceived or debts paid              | Date<br>d transfer was<br>made |
|      |             | Person Who Received Trans  | nsfer  |  |                           |                                   |                                |
|      |             | Number Street  |  |  |                           |                                   |                                |
|      |             | City State<br>Person's relationship to yo  | Zip Code<br>u  |  |                           |                                   |                                |
|      |             | Person Who Received Trans  | nsfer  |  |                           |                                   |                                |
|      |             | Number Street  |  |  |                           |                                   |                                |
|      |             | City State<br>Person's relationship to yo  | Zip Code<br>u  |  |                           |                                   |                                |
| 19.  | ben         | hin 10 years before you file<br>eficiary?<br>ese are often called asset-pro              |  | you transfer any property to a                   | self-settled trust or sim | ilar device of which              | you are a                      |
|      | <b>✓</b>    | No   | ,  |  |                           |                                   |                                |
|      |             | Yes. Fill in the details.  |  |  |                           |                                   |                                |
|      |             |  |  | Description and value of the                     | he property transferred   |                                   | Date<br>transfer was<br>made   |
|      |             | Name of trust  |  |  |                           |                                   |                                |

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Debtor 1 Kenneth Parker Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code

City

State

Zip Code

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Parker Debtor 1 Kenneth Case number (if known) Middle Name First Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Debt |      | Kenneth   |  |   | Parker  | Case  | number (if i | known)                        |              |                      |
|------|------|---|--|---|---|---|--------------|-------------------------------|--------------|----------------------|
|      |      | First Name  | Middle Nam   | e   | Last Name   |   |              |                               |              |                      |
| 26.  | _    |   | ı in any judicial or adr   | ninistrative  | e proceeding under  | any environment                                       | al law? Ind  | clude settlement              | ts and order | rs.                  |
|      |      | No<br>Yes. Fill in the det  | ails.  |   |   |   |              |                               |              |                      |
|      |      | 0   |  | Cou   | rt or agency  |   | Nature o     | f the case                    |              | Status of the case   |
|      |      | Case title  |  | Cou   | rt Name   |   |              |                               |              | Pending              |
|      |      | Case number   |  | Num   | nberStreet  |   |              |                               |              | On appeal  Concluded |
|      |      | 1   |  | City  | State   | Zip Code  |              |                               |              |                      |
| Part | 11:  | Give Details Ab   | out Your Business  | or Conne  | ections to Any Bu   | siness  |              |                               |              |                      |
| 27.  | Witl | A sole proprie A member of A partner in a An officer, dir An owner of a | you filed for bankrupt<br>etor or self-employed<br>a limited liability comp<br>a partnership<br>rector, or managing ex<br>at least 5% of the votir<br>bove applies. Go to P<br>at apply above and fill | in a trade,<br>eany (LLC)<br>eccutive of<br>eg or equity<br>art 12. | profession, or other<br>or limited liability partial<br>a corporation<br>y securities of a corp | r activity, either fu<br>artnership (LLP)<br>poration | _            |                               | y business?  |                      |
|      |      |   |  |   | Describe the natu   | ure of the busines                                    | ss           | Employer Ident include Social |              |                      |
|      |      | Business Name   |  |   |   |   |              | EIN:                          |              |                      |
|      |      | Number Street   |  |   | Name of account   | ant or bookkeepe                                      | er           | Dates business                | s existed    |                      |
|      |      | City  | State Zip Co   | de  |   |   |              | From                          | To           | <u> </u>             |
|      |      |   |  |   | Describe the natu   | ure of the busines                                    | ss           | Employer Ident include Social |              |                      |
|      |      | Business Name   |  |   |   |   |              | EIN:                          |              |                      |
|      |      | Number Street   |  |   | Name of account   | ant or bookkeepe                                      | er           | Dates business                | s existed    |                      |
|      |      | City  | State Zip Co   | de  |   |   |              | From                          | _To          |                      |
|      |      |   |  |   | Describe the natu   | ure of the busines                                    | ss           | Employer Ident include Social |              |                      |
|      |      | Business Name   |  |   |   |   |              | EIN:                          |              |                      |
|      |      | Number Street   |  |   | Name of account   | ant or bookkeepe                                      | er           | Dates business                | s existed    |                      |
|      |      | City  | State Zip Co   | de  |   |   |              | From                          | To           |                      |
|      |      |   |  |   |   |   |              |                               |              |                      |

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| Deb  | tor 1  | Kenneth   |                                |  | Parker                        | Case number (if known)  |
|------|--------|---|--------------------------------|--|-------------------------------|---|
|      |        | First Name  |                                | Middle Name                                  | Last Name                     |   |
| 28.  |        | nin 2 years before y<br>ditors, or other par<br>No<br>Yes. Fill in the deta | ties.                          | bankruptcy, did yo                           | u give a financial stateme    | nt to anyone about your business? Include all financial institutions,   |
|      | ш      | 100.1   | ano bolow.                     |  | Date issued                   |   |
|      |        |   |                                |  | Date Issued                   |   |
|      |        | Name  |                                |  | MM/DD/YYYY                    |   |
|      |        | N Olasai  |                                |  | <u>-</u>                      |   |
|      |        | Number Street   |                                |  |                               |   |
|      |        | City  | State                          | Zip Code                                     | <u>-</u>                      |   |
|      |        | Oity  | Olale                          | Zip codc                                     |                               |   |
| Part | 12:    | Sign Below  |                                |  |                               |   |
| t    | true a | ind correct. I unde<br>kruptcy case can i                                   | erstand that<br>result in fine | making a false stat<br>es up to \$250,000, o | ement, concealing proper      | ents, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
|      |        | /S/ F   | Kenneth Park<br>ire of Debtor  |  |                               | Signature of Debtor 2   |
|      |        | Sigilatu  | ile oi Debioi                  | 1  |                               | <u> </u>  |
|      |        | Date 1  | 2/6/2016                       |  |                               | Date  |
|      | Did yo | ou attach addition  | al pages to                    | Your Statement of I                          | Financial Affairs for Individ | luals Filing for Bankruptcy (Official Form 107)?  |
| ı    | N      | lo  |                                |  |                               |   |
| į    | Y      | es  |                                |  |                               |   |
|      | Did yo | ou pay or agree to  | pay someor                     | e who is not an att                          | orney to help you fill out b  | ankruptcy forms?  |
| Г    | V      | lo  |                                |  |                               |   |
| Ī    | Y      | es. Name of person  |                                |  |                               | Attach the Bankruptcy Petition Preparer's Notice,<br>Declaration, and Signature (Official Form 119).  |

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney.* If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor.* If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$387.00
- 3. Before signing this agreement, the attorney has received, \$400.00 toward the flat fee, leaving a balance due of \$3,600.00; and \$77.00 for expenses, leaving a balance due of \$3,987.00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: 12/5/2016    |                        |
|--------------------|------------------------|
| Signed:            |                        |
| /s/ Kenneth Parker | 0 + 1 = 0              |
| Dennith Parker     | /s/ Ayah Abdelhadi     |
| Debtor(s)          | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

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B 203 (12/94)

#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re | Kenneth Parker   |                                   | Case No.  |                              |
|-------|--|-----------------------------------|---|------------------------------|
| _     | Debtor   |                                   |   | (If known)                   |
|       |  |                                   | Chapter   | Chapter 13                   |
|       | DISCLOSURE OF C  | COMPENSATIO                       | N OF ATTORNEY F   | OR DEBTOR                    |
| 1.    | <ul> <li>Pursuant to 11 U.S.C. § 329(a) and Fe<br/>compensation paid to me within one y<br/>rendered or to be rendered on behalf or</li> </ul> | rear before the filing of the p   | petition in bankruptcy, or agreed to  | be paid to me, for services  |
|       | For legal services, I have agreed to acc   | cept                              |   | \$4,000.00                   |
|       | Prior to the filing of this statement I ha   | ave received                      |   | \$400.00                     |
|       | Balance Due  |                                   |   | \$3,600.00                   |
| 2     | . The source of the compensation paid  | to me was:                        |   |                              |
|       | <b>✓</b> Debtor  | Other (specify)                   |   |                              |
| 3     | . The source of the compensation paid  | to me is:                         |   |                              |
|       | <b>✓</b> Debtor  | Other (specify)                   |   |                              |
| 4     | . I have not agreed to share the abo<br>members and associates of my law   | ve-disclosed compensation w firm. | n with any other person unless the  | y are                        |
|       |  | firm. A copy of the agreeme       | th a other person or persons who a<br>ent, together with a list of the name |                              |
| 5     | . In return for the above-disclosed fee, I<br>a. Analysis of the debtor's financ<br>bankruptcy;  |                                   | service for all aspects of the bank<br>advice to the debtor in determining  |                              |
|       | b. Preparation and filing of any po  | etition, schedules, statemer      | nts of affairs and plan which may b   | pe required;                 |
|       | c. Representation of the debtor a  | t the meeting of creditors a      | nd confirmation hearing, and any a  | adjourned hearings thereof;  |
|       | d. Representation of the debtor in   | n adversary proceedings an        | d other contested bankruptcy matt   | ters;                        |
| 6     | . By agreement with the debtor(s), the al  | bove-disclosed fee does no        | ot include the following services:  |                              |
|       |  |                                   |   |                              |
|       |  | CERTIFICA                         | ATION   |                              |
|       | I certify that the foregoing is a complete tor(s) in this bankruptcy proceedings.  | statement of any agreemer         | nt or arrangement for payment to m  | ne for representation of the |
|       | 12/6/2016  |                                   | /s/ Ayah Abdelhadi  |                              |
|       | Date   |                                   | Signature of Attorney   |                              |
|       |  |                                   | Semrad Law Firm   |                              |
|       | <del>-</del>   |                                   | Name of law firm  |                              |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

|   | \$245 | filing fee         |
|---|-------|--------------------|
|   | \$75  | administrative fee |
| + | \$15  | trustee surcharge  |
|   | \$335 | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

|   | \$1,167 | filing fee         |
|---|---------|--------------------|
| + | \$550   | administrative fee |
|   | \$1 717 | total fee          |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re:          | Parker, Kenneth  Debtor(s)          | Case No   | Case No.                             |  |  |
|-----------------|-------------------------------------|---|--------------------------------------|--|--|
|                 |                                     | Chapter.  | Chapter13                            |  |  |
|                 | VERIFIC                             | CATION OF CREDITOR MAT                                  | ΓRIX                                 |  |  |
| Ti<br>knowledge | he above named Debtors hereby verif | y that the attached list of creditors is tr             | rue and correct to the best of their |  |  |
| Date:           | 12/6/2016                           | /s/ Parker, Kenn<br>Parker, Kenneth<br>Signature of Del |                                      |  |  |

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| Debtor 1 Kenneth First Name   |  | arker<br>ast Name   | Case number (if known)  |   |  |
|---|--|---|---|---|--|
|   | estions for Reporting Purposes   | ast Name  |   |   |  |
| 16. What kind of debts do you have?   | 16a. Are your debts primarily of "incurred by an individual No. Go to line 16b.  ✓ Yes. Go to line 17.  16b. Are your debts primarily I money for a business or in No. Go to line 16c.  ✓ Yes. Go to line 17.  | primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as individual primarily for a personal, family, or household purpose." de 16b. The 17. The primarily business debts? Business debts are debts that you incurred to obtain the ness or investment or through the operation of the business or investment. De 16c. |   |   |  |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | ☐ No.  | 7. Do you estimate that af  | ter any exempt property is excl<br>stribute to unsecured creditors' |   |  |
| 18. How many creditors<br>do you estimate that<br>you owe?  | ☑ 1-49<br>☐ 50-99<br>☐ 100-199<br>☐ 200-999  | 1,000-5,000<br>5,001-10,000<br>10,001-25,00   | 50,0  | 01-50,000<br>01-100,000<br>e than 100,000   |  |
| 19. How much do you estimate your assets to be worth?   |  | \$1,000,001-\$<br>\$10,000,001-<br>\$50,000,001-<br>\$100,000,001   | \$50 million  | 0,000,001-\$1 billion<br>00,000,001-\$10 billion<br>000,000,001-\$50 billion<br>e than \$50 billion |  |
| 20. How much do you<br>estimate your<br>liabilities to be?  |  | \$1,000,001-\$ \$10,000,001- \$50,000,001- \$100,000,001  | \$50 million  | 0,000,001-\$1 billion<br>00,000,001-\$10 billion<br>000,000,001-\$50 billion<br>e than \$50 billion |  |
| Part 7: Sign Below  | I have everyingd this petition, an   | d I dodoro undor popolt   | y of porium that the informat                                       | tion provided is true and   |  |
| For you   | correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceunder Chapter 7.   |   |   |   |  |
|   | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. |   |   |   |  |
|   | I understand making a false state connection with a bankruptcy ca both. 18 U.S.C. §§ 152, 1341, 18   | se can result in fines up   |   |   |  |
|   | /s/ Kenneth Parker Signature of Debtor 1   | geth farker   | Signature of Debtor 2   | ***************************************   |  |
|   | Executed on 12/5/2016<br>MM / DD /   |   | Executed on   | / DD / YYYY   |  |

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| Debtor 1 | Kenneth   |                                       | Parker                         | Case number (if known)   |
|----------|---|---------------------------------------|--------------------------------|--|
|          | First Name  | Middle Name                           | Last Name                      |  |
|          | thin 2 years before yeditors, or other par<br>No<br>Yes. Fill in the deta | ties.                                 | you give a financial staten    | nent to anyone about your business? Include all financial institutions,  |
| l        |   |                                       | Date issued                    |  |
|          |   |                                       | <b>Dato</b> 100000             |  |
|          | Name  |                                       | MM/DD/YYYY                     | _  |
|          |   | · · · · · · · · · · · · · · · · · · · |                                |  |
|          | Number Street   |                                       |                                |  |
|          | City  | State Zip Code                        |                                |  |
|          |   |                                       |                                |  |
| Part 12: | Sign Below  |                                       |                                |  |
|          | nkruptcy case can r   |                                       |                                | erty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 2 |
|          | Data 1  | 2/5/2016                              |                                | Date   |
|          |   |                                       |                                |  |
| Did y    | ou attach additiona   | Il pages to Your Statement            | of Financial Affairs for Indiv | riduals Filing for Bankruptcy (Official Form 107)?   |
|          | No<br>Yes   |                                       |                                |  |
| Did y    | ou pay or agree to  | pay someone who is not an a           | attorney to help you fill out  | bankruptcy forms?  |
|          | No  |                                       |                                |  |
| 177      | Yes. Name of person   |                                       |                                | Attach the Bankruptcy Petition Preparer's Notice,<br>Declaration, and Signature (Official Form 119).   |

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| Kenneth                   |             | Parker  |   |
|---------------------------|-------------|---|---|
| First Name                | Middle Name | Last  | Name  |
|                           |             |   |   |
| First Name                | Middle Name | Last  | Name  |
| Sankruptcy Court for the: | Northern    | District of                                   | Illinois  |
|                           |             |   | (State)   |
|                           |             |   |   |
|                           | First Name  | First Name Middle Name First Name Middle Name | First Name Middle Name Last First Name Middle Name Last |

Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

If two married people are filing together, both are equally responsible for supplying correct information.

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| You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining<br>money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18<br>U.S.C. §§ 152, 1341, 1519, and 3571. |   |  |  |  |  |
|--|---|--|--|--|--|
| Part 1: Sign Below   |   |  |  |  |  |
| Did you pay or agree to pay someone who is NOT an attorn   | ey to help you fill out bankruptcy forms?   |  |  |  |  |
| ☑ No   |   |  |  |  |  |
| Yes. Name of person  | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |  |  |  |  |
|  |   |  |  |  |  |
|  |   |  |  |  |  |
| Under penalty of perjury, I declare that I have read the sum that they are true and correct.   | mary and schedules filed with this declaration and  |  |  |  |  |
| * /s/ Kenneth Parker Cameth Fails  | *   |  |  |  |  |
| Signature of Debtor 1  | Signature of Debtor 2   |  |  |  |  |
| Date 12/5/2016<br>MM/DD/YYYY   | Date MM/DD/YYYY   |  |  |  |  |
| WINDOWTTT  | PHINI/DD/1111   |  |  |  |  |

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| Debt   | or 1 | Kenneth   |  | Parker                 | Case number (if known)  |   |
|--------|------|---|--|------------------------|---|---|
|        |      | First Name  | Middle Name  | Last Name              |   |   |
| 16.    | Ca   | lculate the median far                            | mily income that applies to y                                      | ou. Follow these st    | eps:  | er innen da er er en kommune vorruner av energiere vor en er en |
|        | 16   | a. Fill in the state in whic                      | ch you live.   | Illinois               | <del></del>   |   |
|        | 161  | b. Fill in the number of p                        | people in your household.  | 1                      |   |   |
|        | 160  |   | ily income for your state and siz                                  | e of                   |   | \$50,133.00   |
|        |      | household<br>using the link specifie              | d in the separate instructions fo                                  |                        | find a list of applicable median income amounts, go online<br>may also be available at the bankruptcy clerk's office.         |   |
| 17.    | Ho   | w do the lines compar                             | e?   |                        |   |   |
|        | 178  |   |  |                        | his form, check box 1, <i>Disposable income is not determined</i> lation of <i>Disposable Income</i> (Official Form 122C-2).  |   |
|        | 17t  | U.S.C. § 1325(b)                                  |  | Calculation of Disp    | check box 2, <i>Disposable income is determined under 11</i> <b>cosable Income (Official Form 122C-2).</b> On line 39 of that |   |
| Part   | 3;   | Calculate Your Cor                                | nmitment Period Under 1  | 1 U.S.C. §1325         | (b)(4)  |   |
| 18.    | Col  | py your total average i                           | monthly income from line 11.                                       |                        |   | \$0.00  |
| 19.    |      |   |  |                        | ie is not filing with you, and you contend that calculating the of your spouse's income, copy the amount from line 13.        |   |
|        | 19a  | a. If the marital adjustme                        | ent does not apply, fill in 0 on lin                               | ne 19a.                |   | -\$0.00   |
|        | 19b  | o. Subtract line 19a fro                          | om line 18.  |                        |   | \$0.00  |
| 20.    | Cal  | lculate your current m                            | onthly income for the year. F                                      | ollow these steps:     |   | ·····   |
|        | 20a  | a. Copy line 19b.                                 |  |                        |   | \$0.00  |
|        |      | Multiply by 12 (the nu                            | mber of months in a year).   |                        |   | x 12  |
|        | 20b  | o. The result is your cum                         | ent monthly income for the yea                                     | r for this part of the | form.   | \$0.00  |
|        | 200  | c. Copy the median fami                           | ily income for your state and siz                                  | e of household from    | m line 16c.   | \$50,133.00   |
| 21.    | Hov  | w do the lines compare                            | e?   |                        |   |   |
|        | V    | Line 20b is less than lin<br>commitment period is |  | ed by the court, on    | the top of page 1 of this form, check box 3, The  |   |
|        |      |   | or equal to line 20c. Unless oth eriod is 5 years. Go to Part 4.   | erwise ordered by t    | he court, on the top of page 1 of this form, check box  |   |
| Part 4 | 1:   | Sign Below  |  |                        |   |   |
|        |      |   |  |                        |   |   |
|        |      | By signing here, I decla                          | re under penalty of perjury that                                   | the information on     | this statement and in any attachments is true and correct.  |   |
|        |      | /s/ Kenneth Par                                   | rker Kenneth Va  | dy.                    | ×   |   |
|        |      | Signature of Debto                                | r1 '   | :                      | Signature of Debtor 2   |   |
|        |      | Date 12/5/2016<br>MM/DD/YYY                       | $ar{\gamma}$   |                        | Date MM/DD/YYYY   |   |
|        |      |   | NOT fill out or file Form 122C-<br>out Form 122C-2 and file it wit |                        | 39 of that form, copy your current monthly income from line   | 14  |

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re:          | Parker, Kenneth                           | Case No  |                                     |
|-----------------|---|--|-------------------------------------|
|                 | Debtor(s)                                 | 0430 140.  |                                     |
|                 |   | Chapter.   | Chapter13                           |
|                 | VERIFICA                                  | TION OF CREDITOR MAT                                     | RIX                                 |
| Th<br>knowledge | ne above named Debtors hereby verify the. | at the attached list of creditors is tru                 | ue and correct to the best of their |
| Date:           | 12/5/2016                                 | /s/ Parker, Kenne<br>Parker, Kenneth<br>Signature of Deb | (promiss) proce                     |

COMNWLTH FIN 960 N MAIN STREET SCRANTON , PA 18508

SHERWIN WILLIAMS CREDI 16230 PRINCE DR SOUTH HOLLAND , IL 60473

WORLD FINANCE CORPORAT 5519 EAST 82ND STREET INDIANAPOLIS , IN 46250

STELLAR RECOVERY INC 4500 Salisbury Rd Ste 10 Jacksonville , FL 32216

Illinois Title Loan 8700 S Ashland Ave Chicago , IL 60620

Comcast 11621 E. Marginal Way # 5 Bankruptcy Dept Seattle , WA 98168

ComEd 3 Lincokln Cetre c/o Sabrina Copelan Villa Park, IL 60181

Nicor Gas PO Box 5407 Carol Stream , IL 60197

Sprint P O Box 629023 El Dorado Hills , CA 95762

CONTINENTAL C/O SECURITY FINAN POB 3146 SPARTANBURG, SC 29304

Verve PO Box 8099 Newark , DE 19714 Cash America 3940 Lawrenceville Hwy Tucker, GA 30084

PORTFOLIO 120 CORPORATE BLVD, STE 1 NORFOLK , VA 23502

CAPITAL ONE BANK USA, NA 11013 W BROAD ST GLEN ALLEN , VA 23060

MIDLAND FUND 8875 Aero Drive # 200 San Diego , CA 92123